

The following Document contains no Personal Information as defined by NRS 603A.040

**AFFIDAVIT OF ANNUAL ASSESSMENT WORK**  
(Short Form)



TO ALL WHOM IT MAY CONCERN:

The undersigned, Robert T. Yarbray, certifies that at least ONE HUNDRED AND 00/100 DOLLARS (\$100.00) per claim was expended for development, labor and improvement, or equivalent value added, as the annual assessment work for the assessment year ending September 1, 2010 for the following unpatented mining claim(s) generally located in the following sections(s):

**RECORDER'S STAMP**

Name of Claim(s)	Section	Township	Range	Meridian
Eagle 3, Eagle 4	3	2S	68E	MDB&M
Eagle 5, Eagle 6	3	2S	68E	MDB&M
Eagle 7, Eagle 8	10	2S	68E	MDB&M

BLM Serial No(s):  
 NMC- 1004017, 1006216  
 NMC- 1006218, 1006217  
 NMC- 1005292, 1007241

Name and mailing address of owner or claimant:  
Robert T. Yarbray  
78365 Hwy 111, #287  
La Quinta, CA 92253

A total number of 6 claims is being filed with this document.

The work consisted of: Gathering samples, processing, lab testing, evaluating testing results, and road repair.

The work described above was performed at the following locations: Various locations on the claim group.

Said work was performed between Sept. 1, 2009, and July 1, 2010. A total of more than Fifteen hundred and 00/100 DOLLARS (\$1500.00) was expended in performing the work, or equivalent value added. The work was performed by: Robert T. Yarbray.

All of the aforesaid unpatented mining claims are contiguous and work on, or for the benefit of, any one claim or group of claims tends to develop all the claims. The work was performed for the purpose of developing the mineral potential of the claims and to maintain and hold such claims.

Dated this 18<sup>th</sup> day of OCT, 2010

By Robert T. Yarbray  
Owner, Claimant, Agent, or Lessee Signature

Owner, Claimant, Agent, or Lessee Name(printed)

STATE OF \_\_\_\_\_  
 COUNTY OF \_\_\_\_\_

Subscribed and sworn to by \_\_\_\_\_  
 (Owner, Claimant, Agent, or Lessee)  
 before me this \_\_\_\_\_  
 day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 NOTARY PUBLIC (Signature)



# CALIFORNIA JURAT WITH AFFIANT STATEMENT

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-5 to be completed only by document signer[s], *not* Notary)

\_\_\_\_\_  
Signature of Document Signer No. 1

\_\_\_\_\_  
Signature of Document Signer No. 2 (if any)

State of California

County of RIVERSIDE

Subscribed and sworn to (or affirmed) before me on this

18<sup>th</sup> day of OCT., 2010, by  
Date Month Year

(1) ROBERT YARBRAV  
Name of Signer

proved to me on the basis of satisfactory evidence to be the person who appeared before me (.) (.)

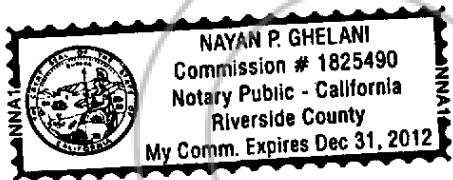
(and

(2) \_\_\_\_\_  
Name of Signer

proved to me on the basis of satisfactory evidence to be the person who appeared before me.)

Signature \_\_\_\_\_

Signature of Notary Public



Place Notary Seal Above

## OPTIONAL

*Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.*

### Further Description of Any Attached Document

Title or Type of Document: AFFIDAVIT OF ANNUAL

ASSESSMENT WORK.

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

RIGHT THUMBPRINT OF SIGNER #1  
Top of thumb here

RIGHT THUMBPRINT OF SIGNER #2  
Top of thumb here