

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



OFFICIAL RECORD
 AMY ELMER, RECORDER

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, 2019 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 9	2	2S	68E	MDB&M
Eagle 10	2	2S	68E	MDB&M
Eagle 11	2	2S	68E	MDB&M

BLM Serial No(s):
 NMC- 1023133
 NMC- 1023134
 NMC- 1023135

Name and mailing address of owner or claimant:
U.S. Rare Earth Minerals, Inc.
78635 Hwy 111, #287
La Quinta, CA 92253

A total number of 3 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, 2018, and July 1, 2019. A total of more than Five hundred and 00/100 DOLLARS (\$ 500.00) 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 7th day of OCT, 20 19

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

ROBERT T. YARBRAV
 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__.

SEE ATTACHMENT

NOTARY PUBLIC (Signature)

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

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

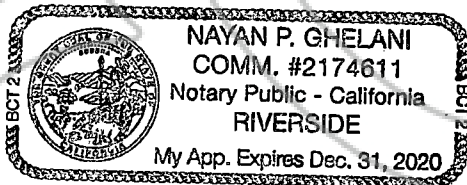
1 _____
 2 _____
 3 _____
 4 _____
 5 _____
 6 _____

Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
 County of RIVERSIDE

Subscribed and sworn to (or affirmed) before me
 on this 05th day of OCT, 2019,
 by Date Month Year
 (1) ROBERT T. YARBRAW
 (and (2) _____),
 Name(s) of Signer(s)



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

Signature _____
 Signature of Notary Public

Seal
 Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: AFFIDAVIT OF ANNUAL ASSESSMENT WORK Document Date: _____
 Number of Pages: 1 Signer(s) Other Than Named Above: _____