



STATEMENT OF REPRESENTATION WORK

Form 9

I have done, or caused to be done, work on the following mineral claim(s):

Amount of fees	Receipt no.	
Name of claim holder(s)		Telephone no.
Mailing address		
Licence no. (valid licence required)	Mining district	NTS
Work performed on mineral claim(s)		
Type of work performed	Work performed on following days	
Work done by	Address	
Grouping certificate no.	Total value of work performed	

The above noted work is to be applied to renew the following claim(s) in the amounts indicated

Claim no.	Claim name	Acreage	Cost Distribution		Next due date	Excess credit
			New work	Existing excess credit		

I hereby certify that

1) I have personal and intimate knowledge of the above noted facts and 2) these facts are true:

CERTIFICATE

Claim holder or agent's signature

Date

DEPARTMENT USE ONLY

This statement is approved as is or is approved to the value of: \$	Mining Recorder signature	Approved date
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