



APPLICATION FOR COMMON ANNIVERSARY DATE

Form 8

Privacy Act Statement

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For Office Use Only

I(We) hereby make application to have the anniversary date of the claim(s) listed hereunder in common with:

Claim Name, Claim Tag No., Mining District, Anniversary Date (YYYYMMDD)

Table with 6 columns: Claim Name, Claim Tag No., Claim Area (Acres), Claim Name, Claim Tag No., Claim Area (Acres)

If insufficient space attach a list which shall be known as a schedule and shall form part of this document.

Claim Holder or Agent's Signature, Date (YYYYMMDD)

Department Use Only

Certificate of Common Anniversary Date
The Common Anniversary Date is approved as requested.

Mining Recorder's Signature, Date (YYYYMMDD), Fee \$, Receipt No.