

REQUEST FOR SAMPLE INFORMATION

The State law governing free analysis of samples sent to State Assay Laboratories requires that certain information be furnished the Laboratory regarding samples sent for assay or identification. A copy of the law will be found on the back of this blank. Please fill in the information called for as completely as possible, and submit it along with your sample. Keep a copy of the information on each sample for your own reference.

Your name in full George Wilhelm

Post-office address Wardrobe Cleaners, Grants Pass, Oregon

Are you a citizen of Oregon yes Date on which sample is sent 11-1-48

Name (or names) of owners of the property Earl White

Name of claim sample obtained from \_\_\_\_\_

Location of property or source of sample (describe as accurately as possible below):

County Josephine Mining district Illinois River

Township 38 S Range 9 W Section 4 Quarter section \_\_\_\_\_

How far from passable road 1 mile from Selma-Oak Flat road

For what minerals or elements do you wish the sample(s) analyzed Au, Ag, Cu, Ni, Co.

	<u>Channel (length)</u>	<u>Grab</u>	<u>Pipe</u>	<u>Description</u>
Sample No. 1	<u>10'</u>	_____	_____	_____
Sample No. 2	_____	_____	_____	_____

**IMPORTANT:** A vein sample should be taken in an even channel across the vein from wall to wall. Location of sample in the workings, together with the width measured, should be recorded.

(Signed) W. D. Bowser

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY - USE OTHER SIDE IF DESIRED**

Description \_\_\_\_\_

Sample Number	GOLD		SILVER		COPPER	NICKEL	COBALT
	oz./T.	Value	oz./T.	Value			
IG-261	0.07		Trace		9.30%	0.05%	Nil

Report issued \_\_\_\_\_ Card filed \_\_\_\_\_ Report mailed \_\_\_\_\_ Called for \_\_\_\_\_