

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 Clark

Post-office address 149 Louis Ave., Grants Pass, Oregon

Are you a citizen of Oregon yes Date on which sample is sent 10/2/47

Name (or names) of owners of the property same

Name of claim sample obtained from Golden Margaret

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

County Josephine Mining district ~~Sucker Cr.~~ WALLOW

Township 40S Range 6W Section 31 Quarter section _____

How far from passable road 700 feet

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

	<u>Channel (length)</u>	<u>Grab</u>	<u>Pipe</u>	<u>Description</u>
Sample No. 1	_____	<u>x</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) George Clark

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

Description _____

Sample Number	GOLD		SILVER					
	oz./T.	Value	oz./T.	Value				
HG-230	2.96	103.60	Trace					

Report issued _____ Card filed _____ Report mailed _____ Called for _____