

Mining Claim Maintenance Fee Refund  
Class Action  
c/o KCC LLC, Claims Administrator  
P.O. Box 404000  
Louisville, KY 40233-4000



**USV**

*SILVER BUCKLE MINES, INC. V US*  
US COURT OF FEDERAL CLAIMS  
Case No. 13-476C

**Must Be Postmarked  
No Later Than  
December 4, 2018**

**CLAIMANT INFORMATION**

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	M.I.	Last Name
<input type="text"/>		
Primary Address		
<input type="text"/>		
Primary Address Continued		
<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Foreign Province	Foreign Postal Code	Foreign Country Name/Abbreviation

1. Fill out this form completely and legibly. **It must be submitted electronically through the website or by mail to the Claims Administrator (who has been retained by Class Counsel for this case and whose address is at Paragraph 5 below) by December 4, 2018, as described further below.**

PLEASE NOTE: A notice has been sent to potential class members based on information in the Bureau of Land Management's (BLM) records. It is your responsibility to ensure that the information provided on this form is complete and accurate, and that you are entitled to a distribution of money arising out of the above lawsuit.

2. Please complete this form if you were the holder of all or any part of an unpatented lode mining claim, unpatented mill site, or unpatented tunnel site located pursuant to the mining laws of the United States prior to August 10, 1993, at the time a claim maintenance fee for such claim or site for the 2013 assessment year was timely paid to the United States Secretary of the Interior.

3. Please fill in the following information:

**CLAIM HOLDER INFORMATION**

<input type="text"/>
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Email Address

<input type="text"/>	—	<input type="text"/>	—	<input type="text"/>
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Area code

Telephone number (home)

<input type="text"/>	—	<input type="text"/>	—	<input type="text"/>
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Area code

Telephone number (work)

**CLAIM INFORMATION**

Provide information about the mining claims or sites for which you are claiming a refund, or attach a separate sheet listing claim name, BLM serial number, claim type, and location date.



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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