

Comstock Gold Prospectors
Claim Assessment Work Form (Please Print)
(Mail to Club PO Box attn VP, bring to meetings, email to VP, or complete on-line)
(Use back of form or attach extra sheet if information doesn't fit)

Name of Claim: _____ ***CAMC/NMC:** _____

Date(s) Work Performed: _____

Number of People Performing Work: _____ **Total Hours:** _____

Names of People Performing Work **^Address of People Performing Work**

Description of Work Performed (Include all, the VP will determine what to use):

Rate Claim (0 - don't like at all, 5 – love it, never get rid of) – Circle One

0 1 2 3 4 5

***Comments: Reasons for above rating? Claim status? Etc.**

All categories on form required except those with * or ^ (required if non-member)