

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear Run Coal COMPANY

Name J. B. Hoston Mine Record No. Bear Run
 Nationality American Age 57 Wt. 194
 Ht. 5'11" Complexion Dark Color eyes Blue Hair Dark Identification Marks Scar on forehead
 Date employed 10/2, 1924 In what capacity employed? Super Check No. _____
 State fully experience in coal mines. None

Have you a Shot Firer's Certificate? Shot Examiner's? Fire Boss's? _____ Mine Foreman's?

For whom have you worked during the last year? For Contracting from _____
 to _____; For _____ from _____
 to _____; For _____ from _____ to _____

At what work were you employed? Carpenter work
 What languages can you speak? Eng Read Eng
 Write Eng

Where were you born? Savannah Ala. Are you a citizen?

Are you single, married, or a widower? Married If married, give full name of wife _____
 Her age _____ Is she living with you? If not, give her present address _____

To what extent is she dependent on you for support? Give names and ages
 of each of your children, and indicate those married: Those living with you _____
Allen Koshin Not living with you (give addresses) _____

Which children, if any, are physically or mentally defective?

Name children who are self supporting W. Allen Hoston Mrs. Koshin's Beavers

Is your father living? No If so, give his age _____ Name and address _____
 Who supports him?

Do you contribute to his support? Is your mother living? No
 If so, give her age _____ Name and address _____
 Who supports her? Do you contribute to her support?

How much do you contribute to support of father or mother, or both?

Date last contribution was made _____ Amount _____
 Give names and addresses of your brothers J. L. Hoston Bear Run Coal

Give names and addresses of your sisters Mary Smith Twoby Okla.

Give names and addresses of EVERY ONE (other than wife, children, father or mother) dependent on you for support

How much do you contribute to their support each year _____

Date of last contribution _____ Amount _____

Have you a copy of the State Coal Mining Law? Have you had notice that the above named Employer is subject
 to the provisions of the Workmen's Compensation Act? and do you elect and agree to become subject thereto
 now? Do you understand the plan in force at the mine for furnishing medical, surgical and hospital service?

Give name and address of person to whom you desire notice sent in event of your death J. B. Hoston
Bear Run Coal

Dated at Bear Run, Colo., Oct 21, 1924

Interpreter _____
 Witness W. Woodward Superintendent or Mine Clerk. J. B. Hoston Signature of Employee or Applicant (Full Name)