

# THE EMPLOYERS MUTUAL INSURANCE CO.

## COMPENSATION INSURANCE INFORMATION

THE Fraker Coal COMPANY

Name Chas M. McElhenny Mine Record No. Beaver River  
Nationality American Age 26 Wt 140  
Complexion med Color eyes blue Hair dark Identification Marks none  
In what capacity employed? Extra Fireman Check No. \_\_\_\_\_  
Experience in coal mines 8 years

Shot Examiner's?  Fire Boss's? \_\_\_\_\_ Mine Foreman's? \_\_\_\_\_  
Worked during the last year? For Super Miner, Denver Colo from \_\_\_\_\_  
; For next year from \_\_\_\_\_  
; For \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
employed? Caretaking of Street Property  
Can you speak? Eng Read Eng  
Write Eng  
Are you a citizen? yes  
Married, or a widower? Divorced If married, give full name of wife \_\_\_\_\_  
Is she living with you? \_\_\_\_\_ If not, give her present address \_\_\_\_\_  
dependent on you for support? \_\_\_\_\_ Give names and ages  
and indicate those married: Those living with you Arthur - Jack (3)  
Not living with you (give addresses) \_\_\_\_\_

are physically or mentally defective? Att dx  
self supporting none  
If so, give his age 62 Name and address Chas J. McElhenny, Col Creek Colo  
Who supports him? Self  
Do you contribute to his support? Yes Is your mother living? Yes  
Name and address Wife Mrs J. McElhenny, Col Creek Colo  
Husband + 2 ds Do you contribute to her support? Yes  
contribute to support of father or mother, or both? 200 - just year  
was made Sept 1925 Amount 45  
addresses of your brothers Clarence McElhenny, Mt Harris Colo  
addresses of your sisters Clara McElhenny, Mt Harris Colo

addresses of EVERY ONE (other than wife, children, father or mother) dependent on you for support  
none  
contribute to their support each year \_\_\_\_\_ Amount \_\_\_\_\_

of the State Coal Mining Law? Yes Have you had notice that the above named Employer is subject  
of the Workmen's Compensation Act? yes, and do you elect and agree to become subject thereto  
Do you understand the plan in force at the mine for furnishing medical, surgical and hospital service? yes  
address of person to whom you desire notice sent in event of your death  
Mrs Chas J. McElhenny, Col Creek Colo  
Beaver River, Colo., 1-2-, 1926

Henry J. Dross Superintendent or Mine Clerk. X C P. ... Signature of Employee or Applicant (Full Name)