

# THE EMPLOYERS' MUTUAL INSURANCE CO.

## COMPENSATION INSURANCE INFORMATION

THE Bear River Coal Co COMPANY

Name D. W. Hughes Mine Record No. \_\_\_\_\_  
 Nationality Irish Age \_\_\_\_\_ Wt. \_\_\_\_\_  
 Height 6' Complexion Dark Color eyes Blue Hair Grey Identification Marks Scar right hand  
 Date employed 9/27/22 1922 In what capacity employed? miner Check No. \_\_\_\_\_  
 State fully experience in coal mines 2 years

Have you a Shot Firer's Certificate? \_\_\_\_\_ Shot Examiner's? \_\_\_\_\_ Fire Boss? \_\_\_\_\_ Mine Foreman's? \_\_\_\_\_  
 For whom have you worked during the last year? For Bear River Coal Co from \_\_\_\_\_  
 to \_\_\_\_\_; For \_\_\_\_\_ from \_\_\_\_\_  
 to \_\_\_\_\_; For \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
 At what work were you employed? Shale breaker  
 What languages can you speak? Eng Read? Eng  
 Write? Eng  
 Where were you born? Ireland Are you a citizen? Yes  
 Are you single, married, or a widower? Married If married, give full name of wife Margaret Hughes  
 Her age 32 Is she living with you? Yes If not, give her present address \_\_\_\_\_  
 To what extent is she dependent on you for support? Wholly Give names and ages  
 of each of your children, and indicate those married: Those living with you none  
 Not living with you (give addresses) \_\_\_\_\_

Which children, if any, are physically or mentally defective? \_\_\_\_\_  
 Name children who are self-supporting \_\_\_\_\_  
 Is your father living? Yes If so, give his age 60 Name and address J. Hughes Bear River, Colo  
 Who supports him? Self  
 Do you contribute to his support? No Is your mother living? Yes  
 If so, give her age 59 Name and address Mrs J. Hughes Bear River Colo  
 Who supports her? Husband Do you contribute to her support? No  
 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. Hughes Bear River Colo  
Catherine Robertson Bear River Colo  
 Give names and addresses of your sisters \_\_\_\_\_  
 Give names and addresses of EVERYONE (other than wife, children, father or mother) dependent on you for support  
none

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? Yes Have you had notice that the above named Employer is subject  
 to the provisions of the Workmen's Compensation Act? Yes, and do you elect and agree to become subject thereto  
Yes? Do you understand the plan in force at the mine for furnishing medical, surgical and hospital service? Yes  
 Give name and address of person to whom you desire notice sent in event of your death Margaret Hughes Bear River Colo

Dated at Bear River, Colorado, 9/27, 1922  
 Interpreter \_\_\_\_\_  
 Witness Mary [unclear] Superintendent or Mine Clerk  
D. W. Hughes Signature of Employee or Applicant (Full Name)