

# THE EMPLOYERS MUTUAL INSURANCE CO.

## COMPENSATION INSURANCE INFORMATION

THE Bear Run Coal COMPANY

Name E. A. Rogers Mine Record No. \_\_\_\_\_  
 Nationality American Age 37 Wt. 145  
 Ht. 5'7" Complexion Red Color eyes Gray Hair Brown Identification Marks \_\_\_\_\_  
 Date employed 1/21/33, 1933 In what capacity employed? Diaper Check No. \_\_\_\_\_  
 State fully experience in coal mines haul

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 \_\_\_\_\_ from \_\_\_\_\_  
 to \_\_\_\_\_; For \_\_\_\_\_ from \_\_\_\_\_  
 to \_\_\_\_\_; For \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

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

Where were you born? Jefferson City, Mo. Are you a citizen? Yes  
 Are you single, married, or a widower? Married If married, give full name of wife Ada M. Rogers  
 Her age 35 Is she living with you? Not at present If not, give her present address Grand Junction, Colo.  
 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 Kenneth Margaret  
Edgar 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 76 Name and address S. H. Rogers  
2370 Whitman Place, St. Louis, Mo. Who supports him? Hisself  
 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 C. S. Rogers, Medley, Calif

Give names and addresses of your sisters Mr. S. H. Stewart 7643  
Wilton St Denver, Colo.

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? 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  
 now? 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 Mrs. S. H. Stewart  
7643 Wilton St Denver, Colo.

Dated at Bear Run, Colo., Dec 24, 1933

Interpreter \_\_\_\_\_  
 Witness W. H. Stewart Superintendent or Mine Clerk. E. A. Rogers Signature of Employee or Applicant (Full Name)