

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear Run Coal COMPANY

Name James P. Horton Mine Record No. Bear Run
 Nationality American Age 28 Wt. 175
 Complexion Red Color eyes Blue Hair Brown Identification Marks ✓
 Date employed 1/1/23 In what capacity employed? Miner 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 _____ from _____
 to _____; For _____ from _____
 to _____; For _____ from _____ to _____

At what work were you employed? Miner

What languages can you speak? Eng Read Eng
 Write Eng

Where were you born? Daylesville, Ala. Are you a citizen? Yes

Are you single, married, or a widower? Married If married, give full name of wife Russell Horton

Her age 21 Is she living with you? Yes If not, give her present address Lay, 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 James, John
 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 58 Name and address J. L. Horton, Bear Run
 Who supports him? Self

Do you contribute to his support? Yes Is your mother living? Yes
 If so, give her age 54 Name and address Mrs. J. C. Horton, Lay, Colo.

Who supports her? Husband Do you contribute to her support? Yes

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 Joseph J. Horton, Sapinro, Colo Joseph L. Horton, Ingalls, Mo

Give names and addresses of your sisters _____

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 Bear Run, Colo

Dated at Bear Run, Colo., Dec 1 1923

Interpreter W. J. Woodward Witness James P. Horton
 Superintendent or Mine Clerk. Signature of Employee or Applicant (Full Name)