

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Frakes Coal COMPANY

Name Walter R. Hebbel Mine Record No. Bear River
Nationality Amer Age 33 Wt. 130
Ht. 5'7" Complexion fair Color eyes blue Hair dark Identification Marks none
Date employed 5/7/25, 1925 In what capacity employed? Foreman Check No. ✓
State fully experience in coal mines Rout - Pinnacle Coal Co. - 2 1/2 yrs.
Amer Coal & Power Co. - 6 mos.
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 Amer Coal & Power Co from 7/1/24
to 3/27/25; For _____ from _____
to _____; For _____ from _____ to _____
At what work were you employed? Power House Engineer
What languages can you speak? English Read Eng
Write Eng
Where were you born? Frakes, Colo Are you a citizen? Yes
Are you single, married, or a widower? married If married, give full name of wife Bertrude Davis Hebbel
Her age 24 Is she living with you? Yes If not, give her present address _____
To what extent is she dependent on you for support? all Give names and addresses of each of your children, and indicate those married: Those living with you Elmer - 4 yrs and
Charles Sherwood - 2 yrs Not living with you (give address) _____
Which children, if any, are physically or mentally defective? all OK.
Name children who are self supporting None
Is your father living? Yes If so, give his age 63 Name and address Sherwood D Hebbel, 4573 - 7133rd Ave, Denver Colo
Who supports him? Self
Do you contribute to his support? No Is your mother living? Yes
If so, give her age 53 Name and address Grace Margaret Hebbel 4573 - 7133rd Ave
Who supports her? Husband Do you contribute to her support? No
How much do you contribute to support of father or mother, or both? No
Date last contribution was made No Amount _____
Give names and addresses of your brothers Mark J Hebbel - 55 - 71 Byers Place, Denver Colo.
Give names and addresses of your sisters St. Francis Hebbel, 4573 - 7133rd Ave, Denver Colo.
Give names and addresses of EVERY ONE (other than wife, children, father or mother) dependent on you for support None
How much do you contribute to their support each year None
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 there 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 Bertrude Davis Hebbel, Bear River, Colo.
Dated at Bear River, Colo., May 11, 1925
Interpreter _____
Witness Henry F. Dodder Superintendent or Mine Clerk. Walter R. Hebbel Signature of Employee or Applicant (Full Name)