

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear River Coal COMPANY

Name James Dave Hopkins Mine Record No. Bear River
 Nationality American Age 35 Wt. 140
 Ht. 5' 5" Complexion Med Color eyes Blue Hair Brown Identification Marks ✓
 Date employed 1/7, 1924 In what capacity employed? Logger Check No. _____
 State fully experience in coal mines 20 years

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 W.P. Coal Co. Wyo. from 1 year

to _____; For _____ from _____
 to _____; For _____ from _____ to _____

At what work were you employed? Head Layer

What languages can you speak? Eng Read Eng

Write Eng

Where were you born? Yorkshire, Eng Are you a citizen? Yes

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

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? Wholly Give names and ages

of each of your children, and indicate those married: Those living with you _____

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? No If so, give his age _____ Name and address _____

Who supports him? _____

Do you contribute to his support? ✓ Is your mother living? ✓

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 Jack Hopkins, Sequim, Wash.

Give names and addresses of your sisters Mrs. D. E. Roberts, Carbonado, Wash.

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? No 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 Katie Hopkins

Bear River, Colo.

Dated at Bear River, Colo., Jan 7th, 1924

Interpreter _____

Witness W. H. Hardworth James Hopkins
