

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear Run Coal COMPANY

Name Ben Price Mine Record No. _____
 Nationality American Age 33 Wt. 168
 Hft. 5'9" Complexion Fair Color eyes Blue Hair Brown Identification Marks None
 Date employed 7/16, 1925 In what capacity employed? Machine Runner Check No. _____
 State fully experience in coal mines 8 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 Bear Run Coal Co. from 7 yrs

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

At what work were you employed? Machine Runner
 What languages can you speak? Eng Read Eng

Write _____
 Where were you born? Optima, Va. Are you a citizen? Yes

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

Her age 22 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 Jean

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? Yes Is your mother living? Yes

If so, give her age 62 Name and address Mr. Campbell, Clark, Va.
 Who supports her? Sons Do you contribute to her support? Yes

How much do you contribute to support of father or mother, or both? 500⁰⁰ per year
 Date last contribution was made Dec. 25th 1924 Amount 50⁰⁰

Give names and addresses of your brothers Price, Huntington, Va.

Give names and addresses of your sisters Mr. T. H. Hanson, Raleigh, N.C.

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 Coal Co.

Dated at Bear Run, Colo., Feb. 16th, 1925

Interpreter J. J. Woodworth
 Witness _____ Superintendent or Mine Clerk. _____ Signature of Employee or Applicant (Full Name) _____