

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear Run Coal COMPANY

Name J. M. Emerson Mine. Record No. 124
 Nationality American Age 36 Wt. 160
 Ht. 5'7 1/2" Complexion Fair Color eyes Blue Hair Brown Identification Marks ✓
 Date employed 9/10, 1924 In what capacity employed? Signer Check No. 43
 State fully experience in coal mines. 17 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 Coal Creek Coal Co. Wyo. from 1922
 to _____; For _____ from _____
 to _____; For _____ from _____ to _____

At what work were you employed? Mining

What languages can you speak? Eng Read Eng
 Write Eng

Where were you born? Phillips W. Va. Are you a citizen? Yes

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

Her age 38 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 Milla Emerson
 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 67 Name and address J. M. Emerson
Absaroka, Idaho Who supports him? Himself

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 John Emerson, Idaho Wyo.

Give names and addresses of your sisters Mr. Annie Cannon, Ft Collins, 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. J. M. Emerson
Bear Run, Colo.

Dated at _____, Colo., _____, 19____

Interpreter J. M. Emerson

Witness J. M. Emerson Superintendent or Mine Clerk. J. M. Emerson Signature of Employee or Applicant (Full Name)