

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear River Coal COMPANY

Name J. W. Ficker Mine Record No. Bear River
 Nationality American Age 58 Wt. 160
 Ht. 5'6" Complexion Dark Color eyes Brown Hair Gray Identification Marks Left arm short
 Date employed 12/14, 1923 In what capacity employed? Supervisor Check No. 42
 State fully experience in coal mines 42 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 Coco Utah Coal Co. from 1 year
 to _____; For _____ from _____
 to _____; For _____ from _____ to _____

At what work were you employed? Shipping

What languages can you speak? Eng Read Eng
 Write Eng

Where were you born? Springfield, Mo. Are you a citizen? Yes

Are you single, married, or a widower? Married If married, give full name of wife Anna C. Ficker

Her age 45 Is she living with you? Not at present If not, give her present address Hayden, 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 Bill, Ruth, James

Joe, Josephine Not living with you (give addresses) John B. Mary C. Finney 1125 Laramie American Coal Paul E. Lou Vocate 1125 Laramie

Which children, if any, are physically or mentally defective?

Name children who are self supporting James B. Mary Finney, Paul E. Lou Vocate

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? 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 _____

Give names and addresses of your sisters Mrs. E. Jones San Antonio, Tex.

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 Anna C. Ficker Hayden, Colo.

Dated at Bear River, Colo., Dec. 19th 1923, 19

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