

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Trabon Coal COMPANY

Name Zunker Jacobson Mine Record No. Ben Ben Coal
Nationality American Age 42 Wt. 140
Complexion Wid Color eyes Blue Hair Dark Identification Marks Small scar on forehead
Employed 12/11, 1955 In what capacity employed? Digger Check No. 3 years
Experience in coal mines 3 years

Shot Firer's Certificate? Shot Examiner's? Fire Boss's? Mine Foreman's?
Where have you worked during the last year? For Victor - Amer Fuel Co, W. Harris, Colo from last year to present

What work were you employed? As Worker + Digger
What languages can you speak? Eng Read Eng Write Eng

Where were you born? Chester, Iowa Are you a citizen? Yes
Single, married, or a widower? married If married, give full name of wife Mary Jacobson
Is she living with you? Yes If not, give her present address None

What children is she dependent on you for support? wholly Give names and ages
Of your children, and indicate those married: Those living with you Mabel (11) - Harry (6)
(1) - Annie (14) - James Catherine (3) Not living with you (give addresses)

What children, if any, are physically or mentally defective? All OK
What children who are self supporting? none
Does 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
Name and address ---
Do you contribute to her support? ---

Do you contribute to support of father or mother, or both? ---
Name and address --- Amount ---

Name and addresses of your brothers Pete Jacobson, Humboldt, Minn
Name and addresses of your sisters Mary Dixon, Fortner, S. Dak

Name and addresses of EVERY ONE (other than wife, children, father or mother) dependent on you for support
none

Do you contribute to their support each year? --- Amount ---

Have you had notice 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
Do you understand the plan in force at the mine for furnishing medical, surgical and hospital service? yes

Address of person to whom you desire notice sent in event of your death
Mary Jacobson, W. Harris, Colo
Ben Ben Coal, Colo., 12-1-, 1955

Henry J. Dodds Superintendent or Mine Clerk. X Signature of Employe or Applicant (Full Name)