

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Fraser Coal COMPANY

Name Mike Pyralin Mine Record No. Ben River, Colo.
Nationality Russian Age 47 Wt. 155
Complexion fair Color eyes blue Hair brown Identification Marks none
Date employed 7/25, 1915 In what capacity employed? Signer Check No. _____
State fully experience in coal mines. 18 years

Have you a Shot Firing Certificate? Shot Examiner's? Fire Boss's? Mine Foreman's?

For whom have you worked during the last year? For Moffatt Coal Co, East and West
; For past year from _____ to _____

at what work were you employed? Signer & Co. Work

What languages can you speak? Engl & Russian Read Eng & Russian
Write Eng & Russian

Where were you born? Russian Are you a citizen? Yes

Are you single, married, or a widower? single If married, give full name of wife _____
Her age _____ Is she living with you? _____ If not, give her present address _____

To what extent is she dependent on you for support? _____ 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? Yes
Name and address Mrs. Annette Pyralin, Samara, Russia

Who supports her? Brothers & myself Do you contribute to her support? Yes

How much do you contribute to support of father or mother, or both? 175⁰⁰ per year

When last contribution was made Mar 1915 Amount 15⁰⁰

Give names and addresses of your brothers Serg Pyralin, Samara, Russia
none

Give names and addresses of your sisters none

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

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

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. Annette Pyralin, Samara, Russia

Dated at Ben River, Colo., Nov. 13, 1915

Interpreter _____
Witness Henry J. Dodes Superintendent or Mine Clerk. [Signature] Signature of Employe or Applicant (Full Name)