

THE EMPLOYERS' MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Bear River Coal COMPANY

Herman Staudhardt Mine Record No. _____

Nationality Czech Age 47 Wt. 210

Complexion Fair Color eyes Brown Hair Brown Identification Marks None

Employed 11/22 1937 In what capacity employed? Trapper head Check No. _____

Years experience in coal mines None

Shot Firer's Certificate? Shot Examiner's? Fire Boss? Mine Foreman's?

Where have you worked during the last year? For East Colorado Lignite Co. from _____

; For past year from _____

; For _____ from _____ to _____

What work were you employed? Day work

languages can you speak? Czech Read? Czech

Write? Czech

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

Are you single, married, or a widower? married If married, give full name of wife Elizabeth Staudhardt

22 Is she living with you? yes If not, give her present address _____

What extent is she dependent on you for support? wholly Give names and ages

of your children, and indicate those married: Those living with you Anna (19) - Fanna (7)

Not living with you (give addresses) _____

Are children, if any, are physically or mentally defective? _____

Are 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? No

Name and address _____

Do you contribute to her support? _____

Do you contribute to support of father or mother, or both? _____

Last contribution was made _____ Amount _____

Names and addresses of your brothers None

Names and addresses of your sisters None

Names and addresses of EVERYONE (other than wife, children, father or mother) dependent on you for support: None

How much do you contribute to their support each year? _____

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 _____

Elizabeth Staudhardt - 3134 June St, Denver, Col.

Dated at Bear River, Colorado, 10/22, 19 37

Anthony J. Paulovich x Herman Staudhardt

Superintendent or Mine Clerk. Signature of Employee or Applicant (Full Name).