

July 2014

Correspondence on a Matter of Workman's Compensation

Morgan Construction Company

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IMMEDIATE NOTICE to be given
with full details as below.

Name of Co.

....., 190

To the Am. Mut. Liability Ins. Co., 40 WATER STREET, BOSTON, MASS.

We hereby notify you that the person described in the
margin, being at that time employed by us, in our works at

Name, Otis L. Stebbins

Age, 33 Married or Single?

Weekly Wages, Nationality,

Speaks and understands English?

How long in your service?

How long employed at work he was doing when
hurt?

Was this regular duty of employee?

in the capacity of Moulder,

was injured on Apr 24 190

at 9:50 o'clock, A M.

Cause and manner of the injury were as follows,

Nature and extent of injury, give physician's report, if any,

Was the injury due to any negligence or fault, and (if so) whose and what?

Any supposed defect in machinery or works, and (if so) what?

Steps taken for immediate relief,

Has the injured person to your knowledge any accident or benefit insurance?

Notice made out by

Position with employer

(OVER)