WCC Form 12 Revised 10-1-63  Filing Requirements (Sec. 263, Title 26, 1940 Code of A county in which the employer is located or does business; to be filed with the Department of Industrial Relations, Alabama 36104.	one copy to be posted at the	he emplover's place (ur p	laces) of business; one	CODY
EMPLOYER'S NOTICE OF ELEC WORKMEN'S COMPENSAT				
STATE OF ALABAMA				
COUNTY OF SHELBY	•••••			
To the Probate Judge of said County:-	<del></del>	•		
Notice is hereby given that effective the	6THday of .	JUNE		1969
We, TROY L. LAWLEY, DBA ELLIO	TSVILLE SERVI	CE STATION 8	GARAGE <sub>an er</sub>	nployer,
conducting the business ofAU.T.QREP.A.	IR.&.SERYICE	*************		<b>,</b>
at (address) ROUTE 1	(	City of SILU	JRIA	********
Alabama, hereby elect to be bound by the pras amended.		rkmen's Compens	sation Law of A	labama,
	By	)	man 1	(Title)
Filed in Probate Office the10day of	·	•	19.69	, , , , , <del>,</del>
Duly recorded in Book No258			Zulci.	بر

Judge of Probate.