FOR	Server de us	E ONLY.	APPLICAT	ION NO	-01		LIOY NO.	23654
Section Prem.;-	se \$ 150 - 0	Matures Matures O Jayable	15 1	h Jan	Amount 8	/	conf.	180 6 / 30 1 Form
THE	MANUF	ACTUR LIF	E ASS	URANG	EMPE CE COL	MPANY.	AD	GENERAL
I.—Nam	e (in full) of life to be in	shired?	1077	7	. 7	, 0		
Norg.	-When applicant is a wather; if married, give a c of husband.	oman give also n lso malden name	and the	1. 10 ri	famu	e Mo	jeeh	I. Commend I
Nore of Is nam	-When applicant is a watcher; if married often	oman give also n leo maiden name	The state of the s). Bri ca or	tanni	e Ma Pro	yeshy voë	[Cond 2 - (5mf)
of Resi	-When applicant is a wather; if married, give a e of husband.	e ozla výva namo eman noblam osl	PLACE.). <i>Bri</i> co. or	DAY.	Pro MONTH.	yeshy x. of Years,	Age next birthday. Make sure tills agrees with date of thirth, agrees with
Norez of faming and fa	When applifant is a wither; it married, give a e of husband. Gence (P.O. Address)	oman give also miso maiden name	70	Ca of Sine	,	Мояти, .—(a) Are you, an	YEAK,	Make sure this agrees with date of birth.)
Norez of Le num 2.—Resi 3.—Parti inc. inc. onc. (8) Do your 5.—(a) SI and d (b) Haw with		exact (a) ging (b) (find ging (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	70	Co. of Sine	,	Montii, .—(a) Are you, an formly sobe	YEAR, d have you b r and of tempe its 7 alcoholic lique	Make sure this agrees with date of birth.) seen, uni- crate and [5] ors ? (c)

10.—What Tontine period is required? 14. State relationship of beneficiary to applicant. If no relationship of the policy of	8.—Sum to be insured?	£3000	18.—Name in full and occupation of Pondow City am
11.—Are premiums to be payable annually or semi-annually, or guarterly? 12.—Amount of Premium? 13.—Amount of Premium? 14.—Amount of Premium? 15.—To which of you survive the Endowment or Tentine Period? 16.—To which of you survive the Endowment or Tentine Period? 17.—Name, Address and Occupation of Intimate friend for reference, (not a relative). 18.—Have you ever made any proposal or application, or opened any negotiations of response to the first premium applied for? If to, sitis mame of person or Company, upon which a policy was not issued on the plan applied for? If to, sitis mame of person or company, when applied for, and why rejected. 20.—Have you paid the first premium upon the policy applied for? 20.—Have you paid the first premium upon the policy applied for? Answers: The and notely, upon the conditions to an annual premium of a sum of person or the first premium upon the policy applied for? Answers: The and notely, upon the conditions to an annual premium of a sum of person or the first premium upon the policy applied for? Answers: The and notely, upon the conditions to an annual premium of a sum of person or the first premium upon the policy applied for? Answers: The and notely, upon the conditions to an annual premium of a sum of person or the first premium upon the policy applied for? Answers: The annual properties of the said payment, and that if shall not receive, a policy or the return of the above payment on the answers to be given by me to the Medical Examiner, shall be the basis of the policy; that has all policy when issued and pay the first premium theroon; that and policy when shall an one when the company is the condition of any premium when due to this policy that and policy when shall and the policy applied for a part by cheege, note, or other oblight, that if any premium has active and first premium theroon; that and policy when shall he be not the policy is the and policy when shall not person the policy is the company and the condition of any premium when due to this po	9.—Kind of Policy?	Derm	midland Bank L
quarterly? 12.—Amount of Premium? 15.—To whom do you wink the policy payable should you survive the Endowment or Tentine Period? 17.—Name, Address and Occupation of intimate friend for reference, (and a relative). 18.—Have you ever made any proposal or application, or spend any negotiations for insurance on your life, with any person or Company, upon which a policy was not issued on the plan applied for? If so, state name of person or company, when applied for, and why rejected. 20.—Have you paid the first premium upon the policy applied for? ANSURE: The annual premium of \$\frac{3}{2}\$ and note), upon the conditions that, if the risk is not ensured by the Company, this sum is to be refunded, in accordance with the Company is no month, I shall immediately notify the Company, at its Head Olice. Township, that if I shall not receive a policy or the return of the above payment and that if I shall not receive a policy or the return of the above payment and that if I shall not receive a policy or the return of the above payment and provided the narwers to be given by me to the Medical Examiner, shall be the basis of the policy; that the method who shall have any late been paid during my life and said policy when issued and pay the first premium thereous that said policy and said policy when issued and pay the first premium the considered as payment, but only as an extension of the amount apportioned to said policy when issued and pay the first premium thereous that said policy when such as all policy when such and transition of any premium when due shall be the basis of the policy; that the method who shall have any late been paid during my life and said policy when issued and pay the first premium the record that and policy who shall have any late been paid during my life and said policy when issued and pay the first premium thereous that said policy and have any late been paid during my life and said policy when issued and pay the first premium the record that and policy which are a payed and the determinatio		The second secon	exists, what insurable interest is opposinteed and add
17.—Name, Address and Occupation of intimate 18.—Have you aver made any proposal or application, or opened any negotiations for insurance on your life, with any person or Company, upon which a policy was not issued on the plan applied for? If so, stain name of person 20.—Have you paid the first premium upon the policy applied for? Answers: The	11.—Are premiums to be quarterly?	a payable annually or semi-annually,	15.—To whom do you wish the policy
rea you already red in this or er Company? give details. 17.—Name, Address and Occupation of intimate Friend for reference, (not a relative). 18.—Have you ever made and proposal or application, or opened any negotiations for insurance on your life, with any proposal or company, upon which a policy was not issued on the plan applied force or Company, upon which a or company, when applied for, and why rejected. 20.—Have you paid the first premium upon the policy applied for T Arswers: The antial premium of S has been paid by and note), upon the conditions that, if the risk is not assumed by the Company, this sum is to be refunded, in accordance with the Company is one month, I shall immediately notify the Company, at its lead of thee, Toronto, personally, or pregistered letter. I declare and agree that I am now in and usually have sound health; that it he above answers are true to the best of my belief; that this declaration distribution of surplus and its determination of the malmer, shall be the basis of the policy; that the methods which may be adopted by the Company; and policy that I will accept and policy when issued any apportioned to said policy are hereby applied for present who stall have you applied the same apportioned to said policy that the methods which may be adopted by the Company; the analysis of the policy; that the methods which may be adopted by the Company; the same apportioned to said policy are hereby applied for every person who shall have very been paid during my life and good health; that if any premium he first premium thereon; that and policy shall not take effect until the first premium to considered as apayment, but only as an extension of the time for payment, and is payed when the consideration with said policy that the same, within one year from this date, then said policy shall be void. **Bear of the property of the property of the policy	12.—Amount of Premiun	2 10000	
18.—Have you ever made any proposal or application, or spened any negotiations for insurance on your life, with any person or Company, upon which a policy was not issued on the plan applied for? If so, stale name of person or company, when applied for, and why rejected. 20.—Have you paid the first premium upon the policy applied for? Answers: The	er Company?	COMPANY	TAKEN
18.—Have you ever made any proposal or application, or opened any negotiations for insurance on your life, with any person or Company, upon which a policy was not issued on the plan applied for? If so, state name of person or company, when applied for, and why rejected. 20.—Have you paid the first premium upon the policy applied for? Arswar: The annual premium of \$	17Name, Address and friend for reference,	Occupation of intimate)	
I declare and agree that I am now in and usually have sound health; that the above answers are time to the best of my belief; that this declaration distribution of the sound health; that the above answers are time to the best of my belief; that this declaration distribution of the sound is determination of the amount apportioned to said policy are hereby accepted for every new headopted by the Company, it said policy that I will make the sound in the sound and pay the first premium thereon; that and policy shall not be repeated that it has an extension of the time for payment, and not considered as payment, but only a resultant when due shall void said policy, except as provided by a resultant when due shall void said policy, except as provided by ame; that non-payment of any are aftern when due shall void said policy, except as provided by same; that no sult shall be brought against the spane; within one year from this date, then said policy shall be void. The shall be a sound paying the said policy and shall be void. POLICY OF POLICY OF	20 1	irst premium upon the nation and in-	
Head Office POLICY OF	ARSWER: The	annual premium of \$	has been said by
POLICY OF KING FDWARD VII 1902	Asswar: The and note, upon the co-form of receipt, given one month, I shall imm I declare and agree that the answers to be given by distribution of surplus and said policy; that I will noce been paid during my life are been paid during my life are considered as payment, herecifer; that non-payme pany i, Fronnection with sail spane, within one year from the bere fact to an accompant	annual premium of \$ coditions that, if the risk is not assu- me by the agent as voucher for the, me by the agent as voucher for the, mediately notify the Company, at its at I am now in and usually have soun y me to the Medical Examiner, shall its determination of the amount ap- ept said policy when issued and pay of good health; that if any premiur, but only as an extension of the time ent of any premium when due shall y id policy later than one year after the m this date, then said policy shall t	bas been paid by (cash, or said payment, and that if I shall not excelve a policy or the return of the above payment with the Company's prisad payment, and that if I shall not receive a policy or the return of the above payment we head Office. Toronto, personally, or by registered letter. In the head of the policy; that the methods which may be adopted by the Company, for poportioned to said policy are kereby accepted for every person who shall have any interest the policy are sereby accepted for every person who shall have any interest to be active to the policy of the policy shall not take effect until the first premium hereon; that said policy shall not take effect until the first premium be settled wholly or in part by cheque, note, or other obligation, such obligation shall not wide as all policy, except as provided by a same; that no suit shall be brought against the C the time when the cause of action accross; and that if I die by my own act, whether same be void.
year It Susmeth	Asswar: The and note, upon the co-form of receipt, given one month, I shall imm I declare and agree that the answers to be given by distribution of surplus and said policy; that I will noce been paid during my life are been paid during my life are considered as payment, herecifer; that non-payme pany i, Fronnection with sail spane, within one year from the bere fact to an accompant	annual premium of \$ coditions that, if the risk is not assu- me by the agent as voucher for the, me by the agent as voucher for the, mediately notify the Company, at its at I am now in and usually have soun y me to the Medical Examiner, shall its determination of the amount ap- ept said policy when issued and pay of good health; that if any premiur, but only as an extension of the time ent of any premium when due shall y id policy later than one year after the m this date, then said policy shall t	is a been paid by the Company, this sum is to be refunded, in accordance with the Company's prisally payment, and that if I shall not receive a policy or the return of the above payment with that the above payment with that the above answers are true to the best of my belief; that this declaration, and health; that the above answers are true to the best of my belief; that this declaration, and health; that the above answers are true to the best of my belief; that this declaration, and health; that the above answers are true to the best of my belief; that this declaration, and health; that the above answers are true to the best of my belief; that this declaration, positioned to said policy; that the methods which may be adopted by the Company, for y the first premium thereon; that said policy shall not take effect until the first premium the said wholly or in part by cheque, note, or other obligation, such obligation shall not to be liable; if desired to the time when the cause of action accrues; and that if I die by my own act, whether same be void. Dated at