

1928-006 Chancery Causes: Mutual Life Insurance Company of New York VS Lola E. Edwards,
Isle of Wight County admx of J. Sandra Edwards + Nannie W. Wilson

492

Petition of Lola E. Edwards, admx of George L. Edwards

ROBERT W. SHULTICE
ATTORNEY AT LAW
518 LAW BUILDING
NORFOLK, VA.

January 10th, 1928.

Mr. R.A. Edwards, Clerk,
Circuit Court of Isle of Wight County,
Isle of Wight Court House, Va.

Re: Mutual Life Insurance Co., vs Edwards (2 cases)

Dear Mr. Edwards:-

I am sending you to-day under separate cover, the court papers in the above mentioned two cases. In each case there is a petition on the part of Lola E. Edwards, administratrix of the estate of George L. Edwards, deceased, and a decree in each case signed by Judge White, but not dated. He has written ~~me~~ a note which you will find fastened to one bundle.

Mr. Stephens told me that Mrs. Edwards had qualified as administratrix of George L. Edwards, deceased, and had signed the bond, but that her surety had not done so on Saturday, but expected to do so on Monday or Tuesday. For this reason, neither decree is dated, because the decrees are to follow the proper giving of bond.

I also enclose two checks made by the Mutual Life Insurance Company, each for the proper amount in the decrees. These checks are payable to your order, and while the date is sometime back, it is because the parties have not agreed to the distribution of these funds. You will find that these checks will be honored on presentation. They are perfectly good, and I am writing the General Counsel of the Company this afternoon that this matter has been settled. Of course, I am taking it for granted that the bond has been completed, and I know that as careful as you are, you will see that this is done before you distribute the funds.

Yours very truly,

R. W. Shultice

Copy to Mr. A.E. Stephens,
Attorney,
Smithfield, Va.

OK
Rec'd
1/16/28.

21 50
20 50

36
100
150

286

List of witnesses for Evie F. Edwards and Normie U. Wilson in
Mutual Life Ins., Co., of N. Y. v. Lola E. Edwards, Adm'x., et als.

To be directed to the Sergeant City of Norfolk, Virginia:

✓ Mr. W. P. Dodson, Seaboard National Bank Bldg. Norfolk, Virginia.
✓ Miss Margaret L. Rogers, " " " " " "

To be directed to the Sergeant City of Suffolk, Virginia:

✓ Dr. D. L. Harrell, Suffolk, Virginia.

To be directed Sheriff Southampton County:

Rev. W. M. Hall, Ivor, Virginia.

To be directed Sheriff Isle of Wight County:

Dr. R. Lee Seward, ✓
Mrs. Sadie Whitley, ✓
Mr. Turpin Whitley, ✓
Mrs. Sarah Whitley, ✓
Mr. Homer Whitley, ✓
Mrs. Fletcher Beale, ✓
Mr. Fletcher Beale, ✓
Mrs. Joe Holland, ✓
Mr. Joe Holland, ✓
Mrs. Marsie Nelms, ✓
Mr. Rogers Nelms, ✓
Mr. Decatur Nelms, ✓
Mrs. Decatur Nelms, ✓
Mr. Walter English, ✓
Mr. Lance Johnson, ✓
Mr. R. B. Wilson, ✓
Mr. Jake Bradhsaw, ✓
Mr. Wilbur Carr, ✓
Mr. R. L. Hall, ✓
Mrs. R. L. Hall, ✓
Mr. George A. Hall, ✓
Mr. R. A. Edwards, ✓
✓ Mr. Adolphus Outland, Carrsville, Virginia.

To be directed Sergeant City of Norfolk, Virginia:

✓ Mr. J. E. Turner, Essex Bldg., Norfolk, Virginia.

R. A. Shuttace

W/K VA

Last of
Hebrews

Zuni, N. M.

Dec. 13 1926

Mr. R. A. Edwards Clerk.

Isle of Wight C. H.
Va

Dear Sir:

Please add these
to the list of witnesses that
Mr. Saunders sent you.

Mrs. Pearl Edwards

Mr. Geo. Henry Hall

"

" R. J. Turner,

"

Sam Hedgepath,

"

Geo. Joyner

Yours truly

Lola E. Edwards.

SAUNDERS & HUTTON
Attorneys at Law
Suffolk, Va.

Dec. 11th, 1926.

Mr. R. A. Edwards Clerk.,
Isle of Wight Court House, Va.

Dear Sir;

The following is a list of witnesses that I would thank you to summons in the Mutual Life Insurance cases V. Edwards and others to be tried Dec., 16th next;

Ben Presson ✓
B. C. Presson ✓
Omar Whitley ✓
Mrs Clyde Luter
Mrs. Joe Holland ✓
Bill Luter ✓
Wyley Bradshaw
E. C. Mingey
McKinley Delk
Lucy Delk
Gus Green
Jack Wilson
Leon Underwood
Lee Williams

All of the above witnesses live in Isle of Wight. If for any cause the sheriff does not know any of these witnesses please have him call this office over telephone reversing the charges. I spoke to Sheriff Chapman about them today and am sure he will be in shape to summons them promptly. Please mail me a summons directed

12/13/26

Received

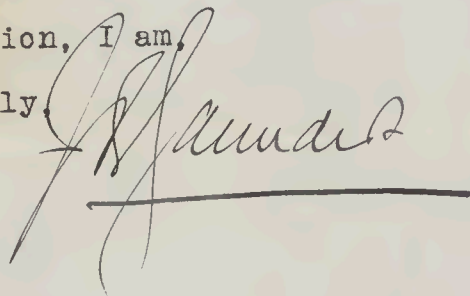
J. R. SAUNDERS

JOHN K. HUTTON

SAUNDERS & HUTTON
Attorneys at Law
Suffolk, Va.

to the sheriff of Nansemond County, for Adolphus Outland. Please
get this off just as soon as you get this letter. Thanking you to
give this your usual prompt attention, I am,

Yours very truly,

A handwritten signature in dark ink, appearing to read "J. R. Saunders", is written over a horizontal line. The signature is fluid and cursive, with the first name "J. R." being more compact and the last name "Saunders" being more extended.

6-

ROBERT W. SHULTICE
ATTORNEY AT LAW
548 LAW BUILDING
NORFOLK, VA.

September 27th, 1926.

R.A. Edwards, Esq.,
Clerk, Circuit Court of Isle of
Wight County,
Isle of Wight C.H. Va.

Dear Mr. Edwards:-

Please issue summons in chancery as
follows, making same returnable to First October Rules,
1926.

The Mutual Life Insurance Company of
New York, a corporation chartered and existing under
the laws of the State of New York, Complainant.

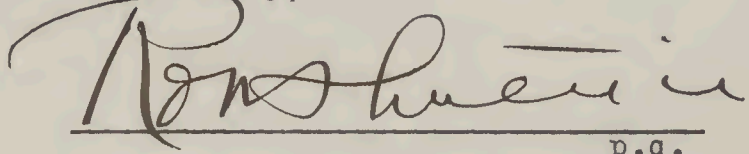
vs

Lola E. Edwards, administratrix of the
estate of J. Landria Edwards and Nannie N. Wilson.
Defendants.

I herewith hand you a check for \$15.00
on account of costs in this matter.

I enclose the Bill of Complaint and
various Exhibits lettered from A. to H. Inclusive.

Yours truly,



p.q.

enc.

The Mutual Life Ins Co. of N. Y.
etc.

73 Cy. # 492

Lola E. Edwards & family
and Nannie W. Nelson

Paid Sept. 30 - 1926.

R. G. Edwards
clerk.

Dep with Sect. \$15⁰⁰

Pd Saff fee 1⁰⁰

A. S. JOHNSON

A. E. S. STEPHENS

JOHNSON & STEPHENS
ATTORNEYS AND COUNSELORS AT LAW

OFFICES AT
ISLE OF WIGHT

SMITHFIELD, VA.

December 10th., 1925.

Mr. R. A. Edwards, Clerk,
Isle of Wight, Virginia.

Dear Gus: In re: Mutual Life Ins., Co., N. Y. v. Edwards etc.

We hand you, herewith, list of witnesses to be summoned
in our behalf in this matter. We would thank you to issue the
summones and forward them to the proper officers as shown on the
enclosed list.

Thanking you, we are,

Very truly yours,

Johnson and Stephens,

By, A. E. Stephens

AESS: S.

THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

CLAIMANT'S CERTIFICATE

TO BE MADE BY THE PERSON CLAIMING THE INSURANCE

THIS FORM must not be used if claim is made under any policy which has not been in force two years or if reinstated in force less than two years from date of reinstatement.

1. Number, date and amount of policy:

No. 734639 Date 3/1/12 \$ 1000
 No. 2400640 Date 4/8/17 \$ 3000
 No. _____ Date _____ \$ _____

NOTE.—Any amount payable may be deposited with the Company at interest or on request be settled by instalments or by an income for life, instead of being paid in one sum. Detailed information regarding these options will be furnished on request.

2. Claimant's name in full: <u>Lola E. Edwards</u>	8. Date of birth of the deceased? _____	12. (a) When did the health of the deceased first begin to be affected? _____
3. Claimant's residence: _____	9. (a) Place of birth of the deceased? _____	(b) Duration of last illness? _____
4. (a) Are you the beneficiary named in the Policy? <u>Yes</u> If not, state in what capacity you make claim: <u>Adm'r of Estate of Lander Edwards</u>	(b) Date of death of the deceased? _____	(c) Immediate cause of death? _____
(b) Are you legally entitled to receive the entire amount payable on the policy? <u>Yes</u> If not, how much of the amount? _____	10. (a) Last residence of the deceased? City or Town _____ County _____ State _____	13. Was a Coroner's Inquest held? If so, furnish the Company with a certified copy of the Verdict of the Jury, and all the evidence on which such Verdict was based? _____
5. What was the date of your birth? <u>Aug 31 1898</u>	(b) Last occupation of the deceased? _____	
6. Name of the deceased in full: _____	11. Name and residence of physician who attended the deceased during his last illness? <u>Dr R Lee Seward</u> <u>Isle of Wright, Va</u>	
7. Place of birth of deceased: Town, City or Village _____ County or Province _____ State or Country _____	14. Had the deceased any other insurance on his life? If so, state in what companies, for what amounts, and the dates and numbers of the policies respectively? Name of Company or Association _____ Date of Policy _____ Policy No. _____ Amount _____	

I refer you to each attending physician's certificate furnished by me herewith which I have read, and ask that it be received as a part of the proof of death.

State of Virginia
 County of Isle of Wright

Signed by

Lola E. Edwards Adm'r of Estate of Lander Edwards
 Claimant.

On this 24th day of August
Lola E. Edwards
 to the best of her knowledge and belief.

A. D. 19 26, personally appeared before me the above-named

and made oath that the answers by her above made and subscribed, are true and full

my Commissioner S. Leon Davis M.D.
6/5/30
Burr, Va.

E. h. h. -

492

3 H. H

THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

CLAIMANT'S CERTIFICATE

TO BE MADE BY THE PERSON CLAIMING THE INSURANCE

THIS FORM must not be used if claim is made under any policy which has not been in force two years or if reinstated in force less than two years from date of reinstatement.

1. Number, date and amount of policy?

No. 2294-635 Date March 19, 1927 \$ 2,000
 No. _____ Date _____ \$ _____
 No. _____ Date _____ \$ _____

NOTE.—Any amount payable may be deposited with the Company at interest or on request be settled by instalments or by an income for life, instead of being paid in one sum. Detailed information regarding these options will be furnished on request.

2. Claimant's name in full?

Ronnie R. Wilson

3. Claimant's residence?

Windsor, R.F.D #3, Va.4. (a) Are you the beneficiary named in the Policy? yes
If not, state in what capacity you make claim.(b) Are you legally entitled to receive the entire amount payable on the policy? yes. If not, how much of the amount?Policy subject to loan.

5. What was the date of your birth?

September 7, 1892.

6. Name of the deceased in full?

George Lee Echols.

7. Place of birth of deceased?

Town, City or Village

Windsor, Virginia.

County or Province

State or Country

Isle of Wight, Virginia.

8. Date of birth of the deceased?

January 13, 1863.

9. (a) Place of death of the deceased?

Windsor, Isle of Wight Co., Va.

(b) Date of death of the deceased?

August 8th, 1926.

10. (a) Last residence of the deceased?

City or Town Windsor, R.F.D #3County Isle of Wight State Virginia

(b) Last occupation of the deceased?

Farmer.

11. Name and residence of physician who attended the deceased during his last illness?

Dr. B. Lee Sewell,
Isle of Wight, Virginia.

14. Had the deceased any other insurance on his life? If so, state in what companies, for what amounts, and the dates and numbers of the policies respectively?

Name of Company or Association

Mutual Life Ins. Co. of N.Y.

Date of Policy

April 9, 1927

Policy No.

2422-040

Amount

\$3,000

12. (a) When did the health of the deceased first begin to be affected?

January, 1926.

(b) Duration of last illness?

Eight months.

(c) Immediate cause of death?

Paralysis.

13. Was a Coroner's Inquest held? If so, furnish the Company with a certified copy of the Verdict of the jury, and all the evidence on which such Verdict was based?

No.

I refer you to each attending physician's certificate furnished by me herewith which I have read, and ask that it be received as a part of the proof of death.

Signed by

Ronnie R. Wilson

Claimant.

State of

Virginia

County of

Isle of Wight

ss.

On this 17th day of AugustRonnie R. Wilson

end made oath that the answers by him above made and subscribed, are true and full

to the best of his knowledge and belief.

A. D. 19 27, personally appeared before me the above-namedH. S. Stephens,
Isle of Wight, Va.

(OVER)

THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

ATTENDING PHYSICIAN'S CERTIFICATE

ALL ANSWERS MUST BE IN THE PHYSICIAN'S HANDWRITING

1. Full name of deceased? George Lee Edward

2. How long had you known the deceased? 35 years.

3. Deceased's place of residence? Andover Va. R 3

4. State the apparent age of the deceased at death? 63

5. (a) How long have you been deceased's usual medical adviser? 35 years

(b) Were you deceased's attending physician during deceased's last illness? Yes

(c) Date of your first visit or prescription in last illness? Feb. 6, 1926

6. What was the duration of the final illness? 6 months

7. Date of Death? Aug. 8, 1926

8. (a) State the disease of which the deceased died. Hemiplegia

(b) Give briefly symptoms present during its progress. Paralysis & general debility following

(c) Was last illness complicated by any previous illness or infirmity acute or chronic? If so, state what and when. No

(d) If from any cause other than a disease state the medical and other facts connected therewith. ✓

8. (e) If accident or external injury contributed in any way to insured's death, give full details. ✓

(f) Was there any surgical operation? (If so, give details.) No

(g) Was a Post-Mortem examination made? No

(h) If so, by whom, and with what results? ✓

9. Was there anything in deceased's habits or mode of life or residence predisposing to disease? No

Signed by

Residence

I rec

my medical education at

which I was graduated in

A. D. 1926, personally appeared before me the above-named

and made oath the answers by him above made and subscribed, are true and full, to

the best of his knowledge and belief.

A. E. Stephens.
Commissioner in Charge.

(OVER)

POLICY MUST ACCOMPANY THIS BLANK

The Mutual Life Insurance Co. of New York.

Head Offices, Nassau, Cedar, William and Liberty Streets.

This request must contain: — (1) the name, and residence, of the insured, or proposed beneficiary, (2) as to who the policy is to be payable in the event that such beneficiary dies before the insured, for example, whether to the insured's executors, administrators or assigns, or to the beneficiary's executors, administrators or assigns, (3) if endowment policy, to whom the endowment is to be payable and (4) whether or not the insured reserves the right to change the beneficiary, and the right to surrender the policy for cash or obtain loans from the Company.

BEFORE EXECUTING THIS BLANK READ CAREFULLY THE FOREGOING INSTRUCTIONS

Policy No. 2234-079 on the life of Charles L. Shattell.

The undersigned hereby requests the above Company to change the beneficiary to

If any beneficiary for whom the insured, the interest of such beneficiary shall vest in the insured, unless otherwise provided herein.

Attention.—Answer Yes or No. Shall I give you the balance within the consent of the beneficiary? I will change the will and give the money for cash, or to obtain loans from the beneficiary.

Amount change shall take effect upon the endorsement of the same on the policy by the Company.

In Consideration of the grant Ag. by the Company in each instance, the undersigned agree to comply with all the requirements of the Company with respect to the subject matter of said request, subject to all the conditions and stipulations contained in the original application and plans, except as herein modified.

IN WITNESS WHEREOF, 1 HAVE 1 SET MY HAND AND SEAL, 1

dev ed

Source: <http://www.oxfordjournals.org/abstract/doi/10.1093/oxfordjournals/ajph.a006111>

County of _____

On this _____ day of _____, 19____, before me the undersigned

to the known and known to me to be the (evaluated

executed the same.

Notary see "NOTICE" at bottom of sheet. Notary sign here.

I hereby accept and agree to the above conditions and reservations which are to be made

when the beneficiary is changed as above requested.

IN WITNESS WHEREOF, 1 have hereunto set my hand and seal, this _____ day of _____, 19____.

day of _____ 19____

State of _____

Continued

the year of our Lord 192 . before me the undersigned

Only comments entered and therefore authorized

to me known and esow to me to be the individual

described in and who examined the foregoing statement, ALL of them agree that [redacted] counted the same [redacted]

[redacted]

NOTES

The office is in the same building as the office of the County Clerk and is located in the same building as the office of the County Clerk.

1. The number of copies of the document to be made shall be determined by the number of copies of the document to be made by the original author. The number of copies of the document to be made by the original author shall be determined by the number of copies of the document to be made by the original author.

THIS SPACE IS RESERVED FOR HOME OFFICE USE ONLY

The beneficiary is changed to the Insured's

The right to revoke this designation of beneficiary is reserved to the insured.

New York,

MAR 31 1926

192

Secretary.

Proof of Execution by a Corporation

STATE OF _____ }
COUNTY OF _____ } ss.

On the _____ day of _____, in the year
192____, before me personally came _____,
to me known, who, being by me duly sworn, did depose and say that
he resides in _____;
that he is the _____ of the _____

_____ the corporation described in and which
executed the instrument on the reverse side hereof; that he knows the
seal of said corporation; that the seal affixed to said instrument is such
corporate seal; that it was affixed by order of the Board of Directors
of said corporation, and that he signed his name thereto by like order.

(Notary sign here)

The officer before whom the above proof of execution is taken must affix his official seal. If he
has no seal, a County Clerk's Certificate must be furnished showing officer's authority to act.

Existing Loan No. _____

This form must be used for loans on policy No. 2,042,060 and subsequent policies which contain a loan clause.

Payee Correct _____

For General Indemnity Home Office

\$ 715⁰⁰

New York

192

On

Feb 19

1926 without grace

premium

to pay to the order of **THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK**

_____ Dollars,
 with interest at the rate of 6 per cent. per annum, at the Home Office of said Company in the City of New York, for value received, hereby depositing with and assigning to said Company Policy No. _____ as collateral security for the repayment of this loan as herein provided.

The application of the foregoing amount is hereby approved in settlement of any existing indebtedness to the Company, and any premiums due under said policy prior to the maturity of the loan; also to the payment of _____. The balance, if any, remaining after payment of sums aforesaid shall be paid by the Company's check.

The borrower may repay this loan, with accrued interest at any time prior to the date when due, and when so paid together with all other indebtedness in respect of said policy this note will be automatically cancelled, and the Company will return the policy.

Failure to repay this loan with interest on the date when due or at the expiration of any extension or renewal which may be granted, shall avoid the said policy, subject, however, to the restrictions contained in said policy which are intended, under certain conditions, to prevent its avoidance.

Provided the loan value of the policy is sufficient, the time for the repayment of this loan may, from time to time, upon request of any of the parties hereto and with or without notice to the other parties, be extended for a period of one year, upon payment of any premium then due on the policy and payment of the interest which shall have accrued at the maturity of the loan; provided, however, that if default value place in payment of any premium due at any date prior to the anniversary to which the loan is extended, the loan shall then mature on the due date of said premium. If no extension is so made the interest due and unpaid shall be added to the existing loan on the due date of the loan and annually thereafter and shall bear interest at the same rate and the loan thus be extended automatically, provided, however, that no such extension shall continue beyond default in the payment of any premium, nor beyond any date on which the amount of the loan together with added and accrued interest, becomes equal to or greater than the cash value of the policy.

In the event of the death of the insured before the maturity or repayment of this loan, and while said policy is in force, the amount of this loan, after proper adjustment of interest to the date notice of death is received by the Company at its Home Office, will be deducted from the amount payable on the policy, the balance being payable to the person or persons entitled thereto.

The application for this loan was made to the Company at its Home Office in the City of New York; said application was accepted, the money paid by the Company, and this note made and delivered thereon; the principal and interest are payable at said Home Office, and this contract is made under and pursuant to and to be governed by the laws of the State of New York, the place of entering into said contract being said Home Office of the Company.

In Witness Whereof

_____ have hereunto set

hand

Witness _____

Insured _____

Address _____

Address _____

Witness _____

Address _____

Address _____

Witness _____

Address _____

Address _____

NOTICE.—Loan will not be made unless this note is properly executed. See instructions printed on reverse side.

PAYMENTS ON ACCOUNT OF LOAN PRINCIPAL

DATE PAID			AGENCY	AMOUNT	RECORDED BY
MONTH	DAY	YEAR			

READ CAREFULLY

General Instructions

1. The note will be dated by the Company on the day the loan is completed. All blank spaces (excepting the date at the top), must be filled in before the note is signed.
2. Each signature must be witnessed. Address of each party and each witness must be given.
3. Signatures by mark must be acknowledged before a Notary Public or some officer authorized by law to take acknowledgments, who must certify in writing under seal, as to the acknowledgment.
4. Signatures by an attorney in fact *will not be accepted*. Each party to the note must execute the note personally.
5. All names must be signed as they appear in the policy, or in the assignment, if the policy is assigned, care being taken that the initials correspond.
6. In all cases where loan is made without the production of the original policy, a surety company bond in double the amount of the loan will be required.
7. Checks for loans are drawn to the joint order of all parties signing the note. In cases where it is desired to pay the whole or any part of the proceeds of a loan to any Company, Corporation or Bank, or to any person or persons other than the insured and beneficiary, the Company's transfer form of transfer order (Form 3922) must be filled out, duly executed and forwarded with the money and other loan papers.
8. Loans are made payable on the next following anniversary of the policy, unless the anniversary falls within sixty (60) days from the date of the loan, in which case the loan will be made payable on the next subsequent anniversary.

Special Instructions

9. When the policy is in favor of the insured, or if the policy reserves to the insured the right to obtain a loan, the note must be executed by the insured.
10. When the policy is in favor of or has been assigned to the insured's wife, the note must be executed by the insured and the wife. (See No. 16).
11. When the policy is in favor of or has been assigned to the insured's father, mother, brother or sister, the note must be executed by the insured and such beneficiary or assignee. (See No. 16).
12. When the policy is in favor of or has been assigned to (A) the insured's wife and her, his or their children, or the insured's wife if living, if not living to her, his or their children; or (B) to the children alone, the note must be executed by (A) the insured and the wife and children or (B) by the insured and children. In all such cases affidavit (Form 3580), giving the names and dates of birth of the children, should be executed. (See No. 16).
13. When any beneficiary or assignee is not of legal age, the note must be executed by the insured and the guardian of the minor beneficiary or assignee. The Company must also be furnished with an official certificate under seal of Court showing appointment of guardian. The guardian of the minors must apply by petition to the Court for an order authorizing him to pledge the policy for a loan. Certified copies of petition and Court order must be furnished.
14. **Other Assignments:** In all cases where the policy has been assigned the note must be executed by the insured and by the beneficiary in each case, as indicated in 10, 11 and 12, and by the assignee. If the beneficiary or assignee (other than the wife, father and mother) is a member of the insured's family, affidavit (Form 3589) is required, giving the date of birth of such beneficiary or assignee.
15. In case the policy has been assigned to a person not a member of the insured's family, and such assignee has no further interest in the policy, he must execute release (Form 3600) instead of joining in the note.
16. When an assignment has been made of the policy to a member of the insured's family and the relationship of the assignee is not given in the assignment, affidavit (Form 3589) is required, giving the date of birth of the assignee.
17. If a corporation executes this note, or an individual, or releases, the corporate seal of such corporation must be affixed to the paper executed.

W.P. DODDSON
LOCAL MANAGER
TO THIS POINT SP
INFORMATION IN REGARD

ORDINARY LIFE

THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

The beneficiary is changed to the Insured's daughter
 while N. Wilson. Subject to the loan made by the
 Company. If any. ***
 The right to make this designation of beneficiary is reserved to the insured.
 New York, March 31, 1906
Secretary

NUMBER

94639

AMOUNT

2000.

AGE

54

ANNUAL PREMIUM

115.90

In Consideration of the One Hundred
Fifteen and 90/100
 annual premium of

the receipt of which is hereby acknowledged, and of the payment of a like amount upon each Nineteen
 day of March hereafter until the death of the Insured.

Promises to pay at the Home Office of the Company in the City of New York upon receipt at said Home Office of due proof of the death of

George L. Edwards

of near Windsor, County of Isle of Wight, State of Virginia, herein called the Insured,

TWO THOUSAND

Dollars.

less any indebtedness hereon to the Company and any unpaid portion of the premium for the then current policy-year, upon surrender of this Policy properly received, to his executors, administrators or assigns

beneficiaries, with the right reserved to the Insured to change the beneficiary.

The beneficiary is changed to the Insured's daughter
 while N. Wilson. Subject to the loan made by the
 Company. If any. ***
 The right to make this designation of beneficiary is reserved to the insured.
 New York, March 31, 1906
Secretary

Death of Beneficiary before Insured: Change of Beneficiary.
 If any beneficiary die before the Insured, the interest of such beneficiary shall vest in the Insured, unless otherwise provided herein.

If the interest of a beneficiary shall have vested in the Insured, or if there be no existing assignment of this Policy, may, from time to time, while this Policy is in force, designate a new beneficiary, with or without reserving the right to change the beneficiary, by filing written notice thereof at the Home Office of the Company accompanied by this Policy for suitable endorsement hereon. Such change shall take effect upon the endorsement of the same on the Policy by the Company.

Premiums.—All premiums are payable in advance at said Home Office or to any agent of the Company upon delivery, on or before date due, of a receipt signed by either the President, Vice President, a Second Vice-President, a Secretary or the Treasurer of the Company and countersigned by said agent.

A grace of thirty-one days, subject to an interest charge at the rate of five per centum per annum, shall be granted for the payment of every premium after the first, during which time the insurance shall continue in force. If death occur within the period of grace, the overdue premium and any other unpaid portion of the premium for the then current policy year shall be deducted from the amount payable hereunder.

Except as herein provided the payment of a premium or installment thereof shall not maintain this Policy in force beyond the date when the next premium or installment of premium is payable. If any premium or installment of be not paid before the end of the period of grace, then this Policy shall immediately cease and become void, and all premiums previously paid shall be forfeited to the Company except as hereinafter provided.

Participation:
Dividends.—This Policy shall participate in the surplus of the Company and the proportion of the surplus accruing hereon shall be ascertained and distributed upon payment of the second year's premium and thereafter at the end of the second and of each subsequent policy year. At the option of the Insured such dividends shall be either—
 (1) Paid in cash; or,
 (2) Applied toward the payment of any premium or premiums; or,
 (3) Applied to the purchase of paid-up participating additions to the Policy; or,
 (4) Left to accumulate to the credit of the Policy with interest at the rate of three per centum per annum compounded annually and payable on the termination of the Policy, but withdrawable on any anniversary of the Policy (hereinafter referred to as "dividend deposits").

Unless the Insured shall elect otherwise within three months after mailing by the Company of a written notice requiring the election of one of the four above options, the dividends shall be applied to the purchase of paid-up additions, as per option (3). Such paid-up additions may be surrendered at any time for a cash value which shall not be less than the original cash dividends as per option (1), provided the reserve for such paid-up additions has not been applied to purchase continued insurance or paid-up insurance in accordance with the provisions of the clause entitled "Options on Surrender or Lapse."

Post-mortem Dividend.—On the death of the Insured a cash dividend will be credited to this Policy for the fraction, if any, of the then current policy year elapsing before such death.

Privilege of Change to Other forms of Policy.—Provided no premium is in default and provided the Insured is then less than 65 years of age, this Policy may be exchanged for any form of premium-paying Policy, without Waiver of Premium or other disability benefit, issued by the Company at the date of this Policy upon either the Limited Payment Life plan or the Endowment Insurance plan. No medical re-examination will be required, and the new Policy shall be for the same amount as this Policy, shall bear the same number and date, shall be written as of the same age of the Insured as this Policy, and shall be at the rate of premium in force for such new Policy at the date of this Policy. Such exchange shall be made upon the written request of the Insured and beneficiary or assignee, if any, and upon the surrender of this Policy, and upon the payment of a sum equal to the differences between the premiums paid hereon and the premiums which would have been paid upon the Policy had it originally been upon the new plan, with interest on such differences from the various due dates to the date of exchange at the rate of six per centum per annum compounded annually. Allowance will be made for any larger dividends on the new plan.

ORDINARY LIFE

AMOUNT OF INSURANCE
PAID AT DEATH

PREMIUMS PAYABLE DURING LIFE

ANNUAL DISTRIBUTION

Conditions:

Residence and Travel.—This Policy is free from any restriction as to residence and travel.

Occupation.—If, within the period of one year after the date of issue of this Policy, the Insured shall engage in military or naval service in time of war or in any work as a civilian in any capacity whatever in connection with actual warfare, and shall die within one year from the date of beginning such service or work, the Company's liability hereunder shall be limited to one-fifth of the face amount of the Policy, unless, prior to the date of beginning such service or work, a single extra payment of three per centum of the face amount of the Policy shall have been made to the Company. As to other occupations of the Insured, the Policy is subject, during the first year following its date of issue, to the restrictions stated in the application copy of which is endorsed hereon or attached hereto.

After one year from its date of issue, this Policy is free from any restriction as to military and naval service, and is free from any restriction as to all other occupations of the Insured.

Suicide.—The Company shall not be liable hereunder in the event of the Insured's death by his own act, whether sane or insane, during the period of one year after the date of issue of this Policy.

Incontestability.—This Policy shall be incontestable, except for non-payment of premiums, provided two years shall have elapsed from its date of issue.

This Policy and the application herefor, copy of which is endorsed hereon or attached hereto, constitute the entire contract between the parties hereto. All statements made by the Insured shall, in the absence of fraud, be deemed representations and not warranties, and no such statement of the Insured shall avoid or be used in defence to a claim under this Policy unless contained in the written application herefor and a copy of the application is endorsed on or attached to this Policy when issued.

If the age of the Insured has been misstated, the amount payable hereunder shall be such as the premium paid hereon would have purchased at the correct age.

Assignment.—The Company shall not be charged with notice of any assignment of any interest in this Policy until the original assignment or a certified copy thereof has been filed at its said Home Office. The Company assumes no responsibility as to the validity or effect of any assignment.

Reinstatement.—Unless it shall have been surrendered for its cash value, this Policy may be reinstated at any time within three years from date of default in payment of any premium, upon evidence of insurability satisfactory to the Company and upon payment of the arrears of premiums with interest thereon at the rate of five per centum per annum; and, at the option of the Insured, either (a) upon payment in cash to the Company of any indebtedness which existed at said date of default, together with interest thereon as specified in the loan provisions of this Policy; or (b) upon reinstatement of such indebtedness, increased by interest thereon as specified in the loan provisions of this Policy, provided such reinstated increased indebtedness does not exceed the loan value at the date of reinstatement.

Reserve and Net Single Premiums.—The reserve held for the face amount of this Policy and for any dividend additions hereto and the reserves and the net single premiums mentioned herein shall be computed in accordance with the American Experience Table of Mortality assuming interest at the rate of three per centum per annum.

Paid-up and Endowment Options.—If at any time the reserve held for the face amount of this Policy and for any dividend additions hereto shall be equal to or greater than the net single premium at the attained age of the Insured, for an amount of Life or Endowment insurance not less than the face amount of this Policy, the Company, upon written request of the Insured and upon delivery of the Policy, will endorse the Policy as fully paid-up participating Life or Endowment insurance, as the case may be, for such amount and kind as said reserve will then purchase when applied as a net single premium; such paid-up insurance shall be subject to any then existing indebtedness to the Company hereon. Or if said reserve shall equal or exceed the face amount of this Policy, the Company, upon legal surrender hereof, will pay in cash such reserve, less any indebtedness hereon to the Company.

Options on Surrender or Lapse.—After three full years' premiums shall have been duly paid, the owner, not later than three months after any default in payment of premium, may elect one of the following options:

(a) to surrender this Policy for its cash value less any indebtedness to the Company hereon (this balance is hereinafter referred to as the net cash value); or,

(b) to have the insurance continued in force from the date of such default as non-participating term insurance, for an amount equal to the face amount of this Policy and any outstanding dividend additions less any indebtedness to the Company hereon; or,

(c) to surrender this Policy for non-participating paid-up life insurance payable at the same time and on the same conditions as this Policy.

The cash value under option (a) will be the reserve for the face amount of this Policy and for any dividend additions hereto at the date of default, less a surrender charge which, in no case, shall be more than one and one-half per centum of the face amount insured by this Policy; after premiums have been paid for ten full years or more there shall be no surrender charge.

The term for which the insurance will be continued under option (b), or the amount of the paid-up life insurance obtainable under option (c), will be such as the net cash value obtainable under option (a) will purchase at the attained age of the Insured at date of default when applied as a net single premium.

In the event of default in payment of premium, if this Policy shall not, within three months after such default, have been surrendered to the Company at its Home Office for its cash value as provided in option (a), or for paid-up insurance as provided in option (b), the insurance will be automatically continued as provided in option (c).

Loans.—At any time while this Policy is in force, provided at least three full years' premiums shall have been paid and no premium is in default, the Company will advance, on proper assignment and delivery of this Policy and on the sole security hereof, an amount which, with interest thereon to the end of the current policy-year, shall be equal to, or at the option of the owner less than, the cash value at the end of said year; any existing loan hereon with accrued interest, and any unpaid portion of said current policy-year's premium shall be paid out of such advance. Interest on the loan shall be at the rate of six per centum per annum and shall be payable at the end of each policy year, and this interest, if not paid when due, shall be added to the existing loan and shall bear interest at the same rate. The loan with accrued interest may be repaid to the Company at any time. Failure to repay any such advance or to pay interest shall not avoid this Policy unless the total indebtedness hereon to the Company shall equal or exceed the cash value at the time of such failure, nor until one month after notice shall have been mailed by the Company to the last known address of the Insured or of the Assignee of record, if any, at the Home Office of the Company; but if, at any time, such indebtedness, together with accrued interest hereon, shall equal or exceed the cash value of the Policy, the Policy shall become void one month after notice shall have been mailed by the Company to said last known addresses. (If a loan is desired before three full years' premiums have been paid, the unpaid balance of the three full years' premiums may be paid by deduction from the loan when made if the amount which can be loaned is sufficient.)

Table of Surrender and Loan Values.

The values hereunder (computed in accordance with the above provisions and upon the assumption that premiums have been paid in full for the number of years the Policy has been in force) apply to a Policy for \$1,000. As this Policy is for \$2,000, the values, i. e. the cash, loan, or paid-up life insurance, will be twice the amounts stated in the table; the term, i. e. the continued insurance, will be for the period stated irrespective of the amount of the Policy.

If there be any dividend additions to the credit of the Policy, or if premiums have been paid for any part of a year beyond the last preceding anniversary, the values and, in certain cases, the term will be increased; if there be any indebtedness on the Policy, the values and the term will be decreased; any dividend deposits will also be payable in cash; the figures contained in the table represent the actual amounts available after deduction of the surrender charge, if any, but assuming no dividend additions or indebtedness.

After Policy Has Been in Force	Cash Value or Loan Value	Paid-up Non-Participating Life Insurance	Paid-up Non-Participating Term Insurance for Years	Days
3 Years	\$69.15	\$109.33	3	93
4 "	100.01	155.32	4	119
5 "	130.95	199.88	5	146
6 "	159.41	239.10	6	169
7 "	190.34	280.68	7	197
8 "	221.19	320.80	8	215
9 "	251.92	359.46	9	234
10 "	282.16	396.66	10	254
11 "	310.26	428.88	11	274
12 "	337.76	459.99	12	295
13 "	364.90	489.69	13	315
14 "	391.62	518.09	14	334
15 "	417.87	545.29	15	354
16 "	443.58	571.08	16	374
17 "	468.72	595.71	17	393
18 "	493.26	619.15	18	413
19 "	517.22	641.49	19	432
20 "	540.68	662.85	20	452
21 "	563.69	683.32	21	471
22 "	586.33	703.02	22	491
23 "	608.65	722.03	23	510
24 "	630.65	740.38	24	529
25 "	652.33	758.09	25	549

Values for later years will be computed upon the above stated basis and will be furnished upon request.

*The cash value provided for in the above table for the end of a policy-year, less interest thereon at the rate of six per centum per annum to the end of such policy-year, can be obtained during such policy-year provided all premiums due prior to the end of such policy-year shall have been duly paid.

†The loan value provided for in the above table for the end of a policy-year can be obtained (less interest) during such policy-year as explained in the above clause entitled "Loans."

Modes of Settlement.—If election be made as hereinafter provided, the net sum payable under this Policy at death of the Insured, provided such net sum be not less than \$1,000, will be settled by one of the following methods in lieu of being then paid in one sum to the person then entitled thereto, hereinafter referred to as the payee:

(1) By the payment of interest at the rate of three per centum per annum on said net sum, payable at the end of each year during the lifetime of the payee, and by the payment upon the death of the payee of the said net sum together with any accrued interest for the year then current; or,

(2) By the payment of equal annual installments for a specified number of years, whether the payee lives or dies, the first installment being payable immediately, in accordance with the following table for each one thousand dollars of said net sum; or,

(3) By the payment (a) of twenty equal annual installments certain whether the payee lives or dies, the first annual installment being payable immediately, and the twentieth annual installment being payable fifteen years later, and (b) of annual installments of a like amount thereafter throughout the remaining lifetime of said payee, the first of such annual installments being payable one year after the twentieth annual installment certain provided said payee be then alive, the payments terminating with the last annual installment preceding the death of said payee, in accordance with the following table for each one thousand dollars of said net sum.

Unless otherwise specified in making the election of one of the above modes of settlement the amount payable upon the death of the payee under mode of settlement (1), or any installments payable after the death of the payee under mode of settlement (2), or any of the twenty equal annual installments certain which may be payable after the death of the payee under mode of settlement (3), shall be payable to the payee's executors or administrators.

The election of any of the foregoing modes of settlement may be made (a) prior to the death of the Insured by the Insured and the beneficiary jointly; or if the right to change the beneficiary has been reserved by the Insured alone; or, (b) upon the death of the Insured, if no prior election shall have been made, by the payee; if the Policy be assigned, the assignee must join in any election; such election shall be made by filing written notice thereof at the Home Office of the Company accompanied by this Policy for suitable endorsement hereon. In event of settlement of this Policy under any of said modes of settlement it shall be surrendered to the Company and a supplementary contract shall be issued providing for the mode of settlement elected and the date of such contract shall be the date of receipt at said Home Office of completed proofs of death.

If the net sum payable under the Policy be payable to two or more persons, modes of settlement (1) and (3) are available only if such person be entitled to receive a separate share of said net sum, in which case each such share shall be settled by the issuance of a separate supplementary contract; modes of settlement (1) and (3) are not available if the payee be a corporation, a partnership or an association.

If so specified in the written notice making election of one of the foregoing modes of settlement, but not otherwise, the supplementary contract may at any time be surrendered to the Company and the Company will pay for the legal surrender thereof, (a) where mode of settlement (1) has been elected, the said net sum together with interest thereon to the date of surrender at the rate of three per centum per annum for the fractional part of a year, if any, for which interest shall not have already been paid; (b) where mode of settlement (2) or (3) has been elected, the committed or then present value computed at three per centum interest, compounded annually, of the then future installments certain exclusive of participation; but no such surrender and commutation will be made

under mode of settlement (3) except after the death of the payee occurring before all of said twenty annual installments certain shall have become payable. A payee who has not the right to surrender the supplementary contract to the Company shall not have the right to assign or encumber such contract or any part thereof or any installments accruing thereon.

Such supplementary contract shall participate annually in the excess of interest earnings over three per centum per annum, at the excess rate each year as is used in the dividend calculations of any year in the case of policies issued in the same year as this Policy; but if settlement be made under mode of settlement (3), only a part of the supplementary contract providing for installments for the period of twenty years shall participate. Any excess interest shall be paid annually on the anniversary of the date of issue of the supplementary contract and, where the installments under mode of settlement (2) or (3) are payable fractionally throughout the year as hereinafter provided, any excess interest shall be calculated on the assumption that the installments are paid annually at the commencement of each supplementary contract year.

Table of Annual Installments for Each \$1,000.

If so requested in writing when making the election, the installments will be paid in equal fractional parts, semi-annually, quarterly or monthly, the total of the fractional payments each year being equal to the annual payment provided for by this table.

Mode of Settlement (1)			Mode of Settlement (3)					
Number of Annual Installments	Amount of Each Annual Installment	Age of Payee at Death of Insured	Number of Annual Installments	Amount of Each Annual Installment	Age of Payee at Death of Insured	Number of Annual Installments	Amount of Each Annual Installment	Age of Payee at Death of Insured
2	\$507.39	10.25	31	\$45.39	53	52	\$37.98	72
3	343.43	11	32	45.82	54	53	37.98	73
4	261.19	12	33	46.27	55	54	37.98	74
5	211.99	13	34	46.73	56	55	37.98	75
6	179.22	14	35	47.22	57	56	37.98	76
7	153.83	15	36	47.73	58	57	37.98	77
8	133.30	16	37	48.25	59	58	37.98	78
9	114.69	17	38	48.79	60	59	37.98	79
10	103.81	18	39	49.36	61	60	37.98	80
11	104.92	19	40	49.94	62	61	37.98	81
12	97.53	20	41	50.54	63	62	37.98	82
13	91.29	21	42	51.17	64	63	37.98	83
14	85.94	22	43	51.80	65	64	37.98	84
15	81.32	23	44	52.45	66	65	37.98	85
16	77.29	24	45	53.12	67	66	37.98	86
17	73.74	25	46	53.80	68	67	37.98	87
18	70.59	26	47	54.49	69	68	37.98	88
19	67.78	27	48	55.19	70	69	37.98	89
20	65.25	28	49	55.90	71	70	37.98	90
21	62.98	29	50	56.62	72	71	37.98	91
22	60.95	30	51	57.35	73	72	37.98	92
23	59.15	31	52	58.09	74	73	37.98	93
24	57.57	32	53	58.84	75	74	37.98	94
25	56.20	33	54	59.60	76	75	37.98	95
26	55.03	34	55	60.37	77	76	37.98	96
27	54.05	35	56	61.15	78	77	37.98	97
28	53.25	36	57	61.94	79	78	37.98	98
29	52.62	37	58	62.74	80	79	37.98	99
30	52.05	38	59	63.55	81	80	37.98	100

Notice.—No agent or other person except the President, President, a Second Vice-President, a Secretary or the Treasurer of the Company has power on behalf of the Company to make, modify or discharge this or any contract of insurance, to extend the time for paying a premium, to waive any lapse or forfeiture or any of the Company's rights or requirements, or to bind the Company by any promise respecting any benefits hereunder or by accepting representation or information not contained in the written application for this Policy.

In Witness Whereof, the Company has caused this Policy to be executed this Nine day of March 1917.

[Signature] Secretary.

Countersigned

[Signature] President.

Registrar.

Date of birth 1-16-1916 State of Ill. 101-
 of Ill. day of January
 M. D. 1916

POLICY MUST ACCOMPANY THIS BLANK
The Mutual Life Insurance Co. of New York.
Head Offices, Nassau, Cedar, William and Liberty Streets.

This request must clearly state:—(1) full name, and relationship to the Insured, or proposed beneficiary, (2) to whose estate the policy is to be payable in the event that such beneficiary dies before the insured, for example, whether to the Insured's executors, administrators or assigns, or to the beneficiary's executors, administrators or assigns, (3) if endowment policy, to whom the endowment is to be payable and (4) whether or not the Insured reserves the right to change the beneficiary, and the right to surrender the policy for cash or obtain loans from the Company.

BEFORE EXECUTING THIS BLANK READ CAREFULLY THE FOREGOING INSTRUCTIONS
Policy No. 234639 on the life of Geo L Edwards

The undersigned hereby requests the above Company to change the beneficiary to

J. Landria Edwards, son

If any beneficiary die before the Insured, the interest of such beneficiary shall vest in the Insured, unless otherwise provided herein.

Attention.—Answer Yes ☒ Shall the right be reserved to the Insured without the consent of the beneficiary (1) to change the beneficiary or No ☐ the beneficiary and (2) to surrender the policy for cash, or to obtain loans from the Company Yes

Above change shall take effect upon the endorsement of the same on the policy by the Company.

In Consideration of the granting, by the Company of such request, the undersigned agree to comply with all the requirements of the Company with respect to the subject matter of said request, subject to all the conditions and stipulations contained in the original application and policy, except as herein modified.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 27th day of April 1925
State of Virginia
County of Isle of August } ss.
On this 27 day of April 1925, in the year of our Lord 1925, before me the undersigned, duly commissioned and thereunto authorized, came Geo L Edwards residing in Sum, to me known and known to me to be the individual described in and who executed the foregoing instrument, and acknowledged that he executed the same.

Notary see "NOTICE" at bottom of sheet.

(Notary sign here)

IF PROPOSED BENEFICIARY IS NOT A MEMBER OF INSURED'S IMMEDIATE FAMILY, FOLLOWING SHOULD BE SIGNED—

I hereby accept and agree to the above conditions and reservations which are to be made when the beneficiary is changed as above requested.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 192____
State of _____
County of _____ } ss.
On this _____ day of _____ 192____, in the year of our Lord 192____, before me the undersigned, duly commissioned and thereunto authorized, came _____ residing in _____, to me known and known to me to be the individual described in and who executed the foregoing instrument, and acknowledged that he executed the same.

(Notary sign here)

NOTICE

*Fill in "Notary" or whatever may be the Official Designation of the Officer executing this document. The officer before whom the above acknowledgments are taken must add his official seal. If he has no seal, a County Clerk's Certificate must be furnished, showing officer's authority to act.

In case this instrument is signed by a corporation the proof of execution on the reverse hereof must also be executed.

THIS SPACE IS RESERVED FOR HOME OFFICE USE ONLY

The beneficiary is changed to the Insured's W. J. Pandria
Successors

The right to revoke this designation of beneficiary is reserved to the insured.

New York,

19

Secretary.

[Handwritten signature]

9-24-73

Proof of Execution by a Corporation

STATE OF _____

COUNTY OF _____

} ss.

On the _____ day of _____, in the year
192____, before me personally came _____,
to me known, who, being by me duly sworn, did depose and say that
he resides in _____;
that he is the _____ of the _____

_____, the corporation described in and which
executed the instrument on the reverse side hereof; that he knows the
seal of said corporation; that the seal affixed to said instrument is such
corporate seal; that it was so affixed by order of the Board of Directors
of said corporation, and that he signed his name thereto by like order.

(Notary sign here)

The officer before whom the above proof of execution is taken must affix his official seal. If he
has no seal, a County Clerk's Certificate must be furnished showing officer's authority to act.

264

[Handwritten initials]

USE CARE IN FILLING IN BLANK SPACES. READ CAREFULLY BEFORE EXECUTING.

DUPLICATE ASSIGNMENT.

For One Dollar, to ^{me}_{us} in hand paid, and for other valuable considerations (the receipt of which is hereby acknowledged)

I ^{we} hereby assign, transfer and set over to (relationship, if any, should be stated)

Leo L. Edwards, insured

whose P. O. Address is

London Va

all ^{my}_{our} right, title and interest in policy No. 1394639

issued by

The Mutual Life Insurance Company of New York,

and for the consideration above expressed I ^{we} do also for myself ^{my}_{ourselves} my ^{executors}_{our} and administrators, guarantee the validity and sufficiency of the foregoing assignment to the above named assignee, ^{his}_{her} ^{executors}_{administrators} or assigns, and ^{his}_{her} ^{title}_{their} to the said policy will forever warrant and defend.

IN WITNESS WHEREOF, I ^{we} have hereunto set ^{my}_{our} hand and seal, this

day of

192

State of

County of

SS:

On this 27 day of April, 1925, before me the undersigned, a Notary Public, duly commissioned and thereunto authorized, came ^{FRANCIS C. HARRIS} residing in ^{Richmond Va} to me known and known to me to be the individual described in and who executed the foregoing assignment, and acknowledged that ^{she} executed the same.

(Notary sign here)

NOTICE

"Full in Notary" or whatever may be the official designation of the officer executing this document. If a Notary before whom the above acknowledgment is taken must affix his official seal. If he has no seal, a County Clerk's Certificate must be furnished, showing officer's authority to act. In case this instrument is signed by a corporation, the proof of execution on the reverse hereof must also be executed.

PROOF OF EXECUTION BY A CORPORATION

STATE OF _____ }
COUNTY OF _____ } ss:

On the _____ day of _____, in the year 192____, before me personally came _____ to me known, who, being by me duly sworn, did depose and say that he resides in _____; that he is the _____ of the _____ the corporation described in and which executed the instrument on the reverse side hereof; that he knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation, and that he signed his name thereto by like order.

(Notary sign here) _____

The officer before whom the above proof of execution is taken must affix his official seal. If he has no seal, a County Clerk's Certificate must be furnished showing officer's authority to act.

35 MAY 2 11 9 30

Exhibit - 13
492
31

ORIGINAL ASSIGNMENT.

TO BE ATTACHED TO AND RETAINED WITH THE POLICY.

For One Dollar, to ^{me}~~us~~ in hand paid, and for other valuable considerations (the receipt of which is hereby acknowledged)

I ^{we}~~us~~ hereby assign, transfer and set over to (relationship, if any, should be stated)

Monie U. Wilson, (Daughter)

whose P. O. Address is Windsor, Va.

all ^{my}~~our~~ right, title and interest in policy No. 2324-639 issued by

The Mutual Life Insurance Company of New York,

and for the consideration above expressed I ^{we}~~us~~ do also for myself ^{my}~~our~~ executors and administrators, guarantee the validity and sufficiency of the foregoing assignment to the above named assignee, ^{his}~~her~~ executors, administrators or assigns, and ^{his}~~her~~ title to the said policy will forever warrant and defend.

IN WITNESS WHEREOF, I ^{we}~~us~~ have hereunto set ^{my}~~our~~ hand and seal, this 15th

day of May, 1917

State of Virginia

County of Isle of Wight

ss.

On this 15th day of May, in the year of our Lord 1917, before me the undersigned, Geo. Lee Edwards residing in Isle of Wight, County, duly commissioned and lawfully authorized, came before me to me known and known to me to be the individual described in and who executed the foregoing assignment, and acknowledged that Geo. Lee Edwards executed the same.

(Notary sign here)

NOTICE

The officer before whom the above acknowledgment is taken must affix his official seal. If he has no seal, a County Clerk's Certificate must be furnished, showing officer's authority to act.

492

3a

Estimate A



VIRGINIA:

IN THE CIRCUIT COURT OF ISLE OF WIGHT COUNTY.

MUTUAL LIFE INSURANCE COMPANY OF NEW YORK,
a corporation chartered and existing under
the laws of the State of New York, ... Complainant,

v.

IOLA E. EDWARDS, Administratrix of the estate
of J. Lendaria Edwards, deceased, and NANNIE N.
WILSON, and others, ... Defendants.

This cause came on this day to be heard upon the complainant's bill of complaint, the exhibits filed therewith, the answer of Iola E. Edwards, administratrix of the estate of J. Lendaria Edwards, deceased, the answer of Nannie N. Wilson, the petition of Iola E. Edwards, administratrix of the estate of George L. Edwards, deceased, the testimony of ~~certain~~ witnesses taken ore tenus before the court, and was argued by counsel.

On consideration whereof, the court, being of opinion that the assignment of the policy of insurance numbered 2394639, issued by the plaintiff on the life of George L. Edwards, now deceased, and assigned to the defendant in this suit, Nannie N. Wilson, is a good and sufficient assignment, and that the sum of One Thousand Seven Hundred and Ninety-three and 24/100 Dollars (\$1,793.24), the amount due on account of said policy of insurance, should be paid to the defendant Nannie N. Wilson; and it further appearing to the court that the plaintiff has from the institution of this suit offered to pay, and has always been ready to pay, into court the said sum of money,

IT IS THEREFORE ADJUDGED, ORDERED AND DECREED that the plaintiff pay to R. A. Edwards, the Clerk of this Court, the said

sum of \$1,795.24, which, when so paid by it, shall be a full acquittance to it under and on account of the said policy of insurance.

It is further adjudged, ordered and decreed that after the receipt of the said sum of money, the Clerk of this Court shall at once pay the costs of this suit, which shall include a fee to Robert W. Shultice, attorney for the plaintiff in this cause, of Seventy-five Dollars (\$75.00), and the balance he shall pay to the said Nannie N. Wilson, or to such of her attorneys, or to such one of her ^{she} attorneys of record, as may be selected to receive the said sum.

8
VIRGINIA: IN THE CIRCUIT
COURT OF ISLE OF WIGHT
COUNTY.

MUTUAL LIFE INSURANCE COM-
PANY OF NEW YORK, etc.,
Complainant,

v.

LOLA E. EDWARDS, admx. of
estate of J. Landrie Edwards
deceased, and NANNIE H.
WILSON, and others,
Defendants.

DECREE.

We have seen this decree
James H. Blitt and
Johnson Stephens.
Attorneys for Nannie H. Wilson
J. J. Gibbs, atty for Lola
E. Edwards admx.
R. J. Shurtice
att for Mutual
Life Ins Co of N. Y.
1928
Jan. 12th
John N. Sebrell

JOHN N. SEBRELL
ATTORNEY AND COUNSELLOR AT LAW
SEABOARD BANK BUILDING
NORFOLK, VIRGINIA

Book 8 - pg 430

VIRGINIA:

IN THE CIRCUIT COURT OF ISLE OF WIGHT COUNTY:

THE MUTUAL LIFE INSURANCE COMPANY OF
NEW YORK, a corporation chartered and
existing under the laws of the State
of New York.....Complainant.

Vs.

ORDER

LOLA E. EDWARDS, administratrix of the
estate of J. Landria Edwards and NANNIE
N. WILSON.....Defendants.

Permission is given Lola E. Edwards, administratrix of
the estate of J. Landria Edwards, deceased, to file her answer in
this cause, and the same is accordingly filed.

*And it is further
ordered that Nannie N. Wilson, within five days
after the return hereof to file her answer
hereto*

4
Virginia;

In the Circuit Court of
Isle of Wight County:

THE MUTUAL LIFE INSURANCE
COMPANY OF NEW YORK, a
corporation chartered and ex-
isting under the laws of the
State of New York,
Complainant

Vs.

ORDER

LOLA E. EDWARDS, administra-
trix of the estate of J.
Lnadria Edwards, and
NANNIE N. WILSON,
Defendants.

1926
W. T.
W. T. W.

X

Book 7
page 354



ISLE OF WIGHT, VA January 17th 1928 8

erss Johnson & Stephens, Attorney,

Re Mutual Life Ins., Company., Of N.Y. Vs. Edwards et als

To R. A. EDWARDS Dr. Suit In Chancery #492.

CLERK OF THE CIRCUIT COURT

Of Isle Of Wight County

COMMISSIONER IN CHANCERY

Prompt settlement of accounts rendered insures prompt attention to future work.

By received from R. W. Shultice, Attorney for		
Mutual Life Ins., Co Of N. Y.		1793.24
To paid R. W. Shultice, Atty fee as directed by		
decree of Jan. 12th 1928,	75.00	
To paid Court Cost to date,	42.35	117.35
Balance as per check 1/17/28 to Johnson & Stephens-	\$	1675.89

The Commonwealth of Virginia,

To the Sheriff of the County of Isle of Wight, Greeting:

WE COMMAND YOU to summon

Mrs Pearl Edwards, George W. Hall, R. J. Turner, Sam Heagerty and George Jayner.

to appear before the Judge of our Circuit Court of the County of Isle of Wight, at the court-house thereof, on the *16th* day of *December* *1926*, to testify and the truth to say in behalf of the *plaintiffs*

in a certain controversy in our said court, before the said Judge depending and undetermined, between

Lola E. Edwards, Admstr et al., Plaintiff,

and

Eric L. Edwards et al., Defendant,

And have then there this writ. Witness *N. G. Edwards* ~~A. S. JOHNSON~~, Clerk of our said court, at the court-house, the *14* day of *Dec.* *1926*, and in the *151* year of the Commonwealth.

N. G. Edwards
clerk

NOTE.—Appear before the Clerk and claim your attendance.

111111

6 orig -

45
80
1350

210
250
980 49
1420 20
1470 9.80
26.90
1300
39.90

49
50
24.50
200
SW 126.50
3.25

CONTROVERSY.

Lola E. Edwards. et al

vs.

SUBPOENA
FOR
WITNESS

Eric F. Edwards et al.

Circuit Court
of
Isle of Wight County

the 16 day of Dec. 1946.

Executed as
before directed
this 15 day
of Dec 1946
J. M. Chapman 5116
By F. L. Cochran 155

The Commonwealth of Virginia,

To the Sheriff of the County of Isle of Wight, Greeting:

WE COMMAND YOU to summon Ben Presson, B. C. Presson, Omar Whitley,
Mrs Clyde Luter, Mrs Joe Holland, Bill Luter, Wiley Bradshaw, E.C. Minga,
McKinley Delk, Lucy Delk, Gus Green, Jack Wilson, Leon Underwood, Lee
Williams
to appear before the Judge of our Circuit Court of the County of Isle of Wight, at the court-
house thereof, on the 16th day of Dec, 1926, at 10:30 A.M, to testify and the
truth to say in behalf of the plaintiffs

.....in a certain controversy in
our said court, before the said Judge depending and undetermined, between

Mutual Life Insurance Co., Plaintiff ,
and

Edwards et als, Defendant ,

And have then there this writ. Witness R.A. Edwards
AR S. JOHNSON, Clerk of our said court, at the
court-house, the 13th day of Dec, 1926, and in the 151 year
of the Commonwealth.

R. A. Edwards Clerk

NOTE.—Appear before the Clerk and claim your attendance.

By E. Ray Miller D.C.

CONTROVERSY. *original*

Mutual Life Ins. Co.

SUBPOENA
FOR
WITNESS

Edwards et al

Circuit Court
of
Isle of Wight County

the *17* day of *Dec* 1926

*Executed as herein
directed, this the 14th
day of Dec 1926
in the Co of Southampton
W. H. Chipman, S/H.
By F. L. Wilson*

The Commonwealth of Virginia,

To the Sheriff of the County of Isle of Wight, Greeting:

WE COMMAND YOU to summon Adolphus Outland,

to appear before the Judge of our Circuit Court of the County of Isle of Wight, at the court-house thereof, on the 16th day of December 1926, to testify and the truth to say in behalf of the Defendants.,

in a certain controversy in our said court, before the said Judge depending and undetermined, between

Lola E. Edwards, Admstr et als.,
New York Life Insurance Co.,, Plaintiff \$
and

Evie F. Edwards, et als.,
Evie F. Edwards, Defendant \$

And have then there this writ. Witness R. A. Edwards
A. J. JOHNSON, Clerk of our said court, at the court-house, the 11th day of December 1926, and in the 151 year of the Commonwealth.

NOTE.—Appear before the Clerk and claim your attendance.

R. A. Edwards

W. J.

Executed in the County of Isle of Wight
on this 13 day of December 1926. by
delivering a true copy of the within
Summoners to Adolphus Outland
in person.

H. H. Chapman, Sheriff
By J. L. Hancock, D.J.

the 16 day of Dec 1926

Isle of Wight County
of
Circuit Court

True F. E. Cummings

SUBPOENA
FOR
WITNESS

12

True E. Cummings

CONTOVERSY.

The Commonwealth of Virginia,

To the Sheriff of the County of Isle of Wight, Greeting:

WE COMMAND YOU to summon W. P. Dotson, Margaret L. Rodgers, and

J. E. Turner,

to appear before the Judge of our Circuit Court of the County of Isle of Wight, at the court-house thereof, on the 16th day of December 1926, to testify and the truth to say in behalf of the Defendants,

in a certain controversy in our said court, before the said Judge depending and undetermined, between

Lola E. Edwards, Admstrx et als., Plaintiff, and

Evie E. Edwards, et als., Defendant,

And have then there this writ. Witness R. A. Edwards, Clerk of our said court, at the court-house, the 11th day of December 1926, and in the 151 year of the Commonwealth.

NOTE.—Appear before the Clerk and claim your attendance.

CONTROVERSY.

Norfolk Va

By calling at the office of

N. P. Dodson

Lola E. Edwards Admstrx, et als,

and not finding *him* there, I

left a notice of the within process

VS

with *Margaret L. Rodgers*

and gave *him* information of its

purport, during business hours,

on the *13* day of *Dec 1926*

in the City of Norfolk, Virginia.

Evie F. Edwards, et als.

C. H. TUMBLESON, City Sergeant

By *Jm Mason*

Deputy

Circuit Court

of

Isle of Wight County

SUBPOENA

FOR

WITNESS

PAID

the *16* day of *Dec, 1926*

Executed in the City of Norfolk
Va., this the *13* day of *Dec 1926*

by serving a Copy hereon

Margaret L. Rodgers

R W Shuler

IN PERSON.

C. H. TUMBLESON,

Sergt. City of Norfolk, Va.

By *Jm Mason* Deputy

By calling at the office of
J E Turner
and not finding *him* there, I
left a notice of the within process
with *Mr White*
and gave *him* information of its
purport, during business hours,
on the *14* day of *Dec 1926*
in the City of Norfolk, Virginia.

By *W C Wince*
C. H. TUMBLESON, City Sergeant
Deputy

SOUTHAMPTON.

Isle of Wight.

Rev. W. M. Hall, (Ivor, Va.)

house thereof, on the 16th day of December 1926, to testify and the

..... in a certain controversy in

Tola E. Edwards, Admstrx et als., Plaintiff,

Wyle E. Edwards et als., Defendant,

R. A. Edwards

And have then there this writ. Witness W. S. JOHNSON, Clerk of our said court, at the

court-house, the 11th day of December 1926, and in the 151 year