

LIFE INSURANCE POLICY

This prop is based on actual vintage insurance paperwork. Every occult investigator should have life insurance.

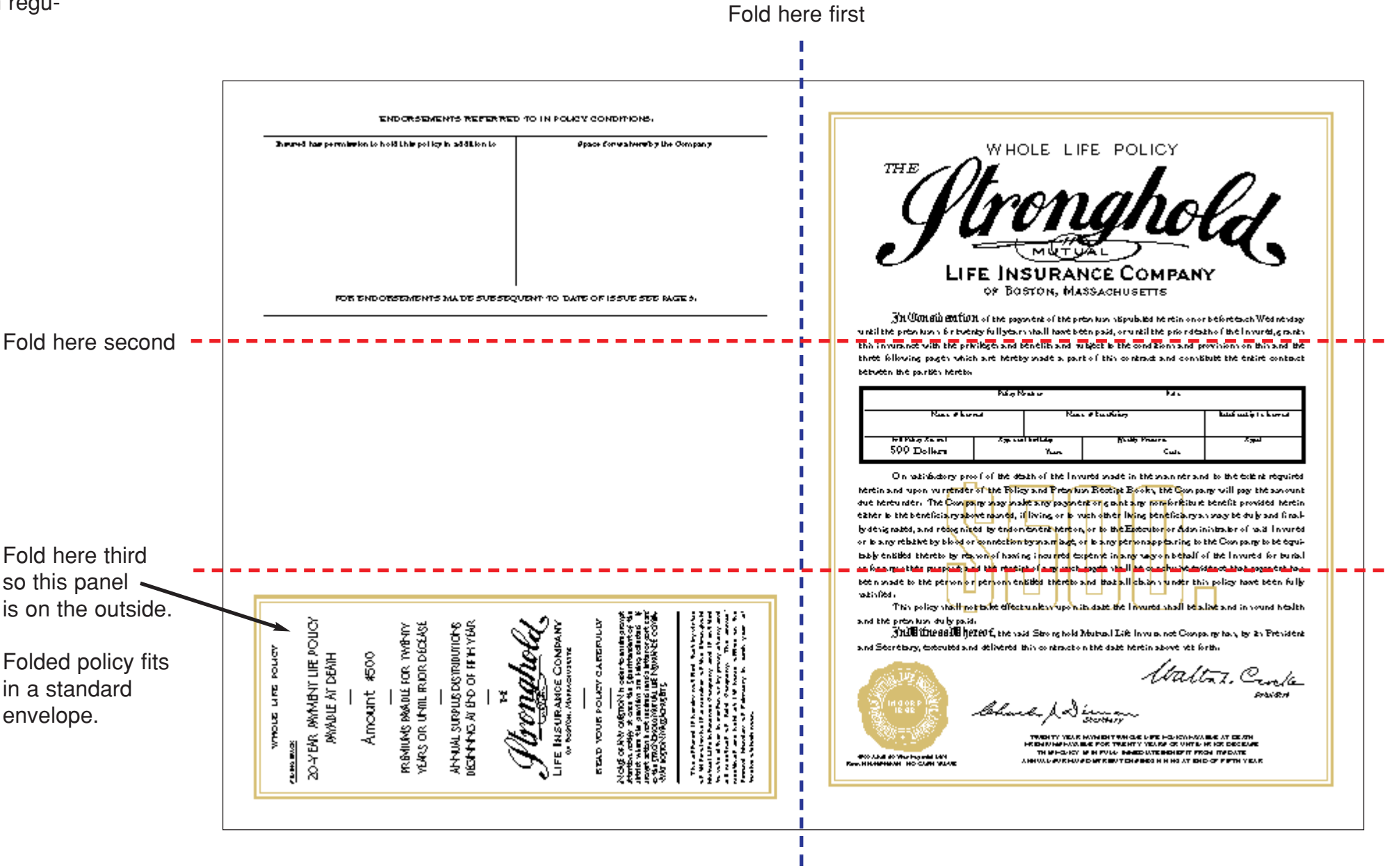
Enter information using built-in Acrobat form fields (or delete default entries and print prop “blank”, and enter info using a real typewriter or by hand).
Print on white or off-white 11x17 inch paper. The prop is meant to be printed on both sides of the paper. Print page two of this file on one side, then reinsert paper and print page three on the reverse.
Fold finished policy in half, then in thirds as shown, so that the policy summary is on the outside.

NOTE: This is the full-size insurance policy, and is the most realistic version of this prop. But, assuming that most people don’t have access to a printer that can handle 11x17 inch paper, a second version is included for printing on regular letter-size paper.

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Questions? Ask them.
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ENDORSEMENTS REFERRED TO IN POLICY CONDITIONS.

Insured has permission to hold this policy in addition to

Space for waivers by the Company

FOR ENDORSEMENTS MADE SUBSEQUENT TO DATE OF ISSUE SEE PAGE 3.

WHOLE LIFE POLICY

FILING BACK

20-YEAR PAYMENT LIFE POLICY
PAYABLE AT DEATH

—
Amount \$500

—
PREMIUMS PAYABLE FOR TWENTY
YEARS OR UNTIL PRIOR DECEASE

—
ANNUAL SURPLUS DISTRIBUTIONS
BEGINNING AT END OF FIFTH YEAR

THE
Stronghold
MUTUAL
LIFE INSURANCE COMPANY
OF BOSTON, MASSACHUSETTS

—
READ YOUR POLICY CAREFULLY

IN CASE OF ANY QUESTION, in order to ensure prompt attention, notify at once the Superintendent of the District where the premiums are being collected. If prompt action is not secured, send a letter or post card to the STRONGHOLD MUTUAL LIFE INSURANCE COMPANY AT BOSTON, MASSACHUSETTS.

The assured is hereby notified that by virtue of this policy he is a member of the Stronghold Mutual Life Insurance Company, and is entitled to vote either in person or by proxy at any and all meetings of said Company. The annual meetings are held at its home office on the second Monday of February in each year, at twelve o'clock noon.

WHOLE LIFE POLICY

THE
Stronghold
MUTUAL

LIFE INSURANCE COMPANY
OF BOSTON, MASSACHUSETTS

In Consideration of the payment of the premium stipulated herein on or before each Wednesday until the premiums for twenty full years shall have been paid, or until the prior death of the Insured, grants this insurance with the privileges and benefits and subject to the conditions and provisions on this and the three following pages which are hereby made a part of this contract and constitute the entire contract between the parties hereto.

Policy Number		Date	
Name of Insured		Name of Beneficiary	Relationship to Insured
Full Policy Amount 500 Dollars	Age next birthday Years	Weekly Premium Cents	Agent

On satisfactory proof of the death of the Insured made in the manner and to the extent required herein and upon surrender of the Policy and Premium Receipt Books, the Company will pay the amount due hereunder. The Company may make any payment or grant any non-forfeiture benefit provided herein either to the beneficiary above named, if living, or to such other living beneficiary as may be duly and finally designated, and recognized by endorsement hereon, or to the Executor or Administrator of said Insured or to any relative by blood or connection by marriage, or to any person appearing to the Company to be equitably entitled thereto by reason of having incurred expense in any way on behalf of the Insured for burial or for any other purpose; and the receipt of any such payee shall be conclusive evidence that payment has been made to the person or persons entitled thereto and that all claims under this policy have been fully satisfied.

This policy shall not take effect unless upon its date the Insured shall be alive and in sound health and the premium duly paid.

In Witness Whereof, the said Stronghold Mutual Life Insurance Company has, by its President and Secretary, executed and delivered this contract on the date herein above set forth.



\$500 Adult 20-Year Payment Life
Form HPLHS812J24 NO CASH VALUE

Charles J. Diman
Secretary

Walter L. Crocker
President

TWENTY-YEAR PAYMENT WHOLE LIFE POLICY; PAYABLE AT DEATH
PREMIUMS PAYABLE FOR TWENTY YEARS OR UNTIL PRIOR DECEASE
THIS POLICY IS IN FULL IMMEDIATE BENEFIT FROM ITS DATE
ANNUAL SURPLUS DISTRIBUTIONS BEGINNING AT END OF FIFTH YEAR

Premium Payments Cease After Twenty Years. After the premiums shall have been paid hereon for twenty full years, this policy will continue in full force, subject to its conditions, without the payment of further premiums.

Change of Beneficiary. With the consent of the Company, the Insured, if of lawful age, may from time to time change the beneficiary by request to the Home Office upon the Company's prescribed form accompanied by this policy, such changes to take effect only upon endorsement hereon by the Company.

Assignment. Any assignment or pledge of this policy or of any benefits hereunder shall be void and of no effect.

Incontestability. After this policy shall have been in force during the lifetime of the Insured for a period of two years from its date of issue, it shall be incontestable except for non-payment of premiums, or for failure to have the policy endorsed in case of previously issued insurance as herein provided, or for error in age.

Age Adjustment. In case of misstatement of age, the amount payable hereunder shall be that which the premiums paid would have purchased at the true age, according to the table of rates and benefits on which this policy is based.

Distribution of Surplus. Beginning at the end of the fifth year from its date, if all the premiums then due shall have been paid, this policy shall annually participate in such distribution of the surplus as the Company may apportion. Surplus distributions will be applied in payment of premiums unless the holder elects to receive them in cash.

Reinstatement. At any time within one year from default in payment of premiums, if the cash surrender value has not been paid or the extension term expired, this policy may be reinstated upon production of evidence of insurability satisfactory to the Company and approved at its Home Office, and upon payment of arrears of premiums and payment or reinstatement of any indebtedness hereon or secured hereby.

Period of Grace. This policy will be paid subject to its condition if the Insured die while premiums are in arrears not more than four weeks, but neither this concession nor the acceptance of any overdue premium shall create an obligation on the part of the Company to receive premiums which are in arrears, nor shall it be a waiver of their payment on Wednesday of each week in advance.

NON-FORFEITURE BENEFITS.—Automatic Extended Term Insurance After Three Years. After premiums shall have been paid on this policy for three full years, then, in case of failure to pay any subsequent premium, the policy, without any further stipulation or act, will be binding on the Company for its full amount as EXTENDED TERM INSURANCE, commencing from the date to which the premiums shall have been paid, the length of the term to be determined by the period of premium payments, according to Table A. The insurance will wholly cease and expire at the end of that term of extension to which the policy is entitled under its conditions.

TABLE A.																																				
Age at Issue	End of 3 Years		End of 4 Years		End of 5 Years		End of 6 Years		End of 7 Years		End of 8 Years		End of 9 Years		End of 10 Years		End of 11 Years		End of 12 Years		End of 13 Years		End of 14 Years		End of 15 Years		End of 16 Years		End of 17 Years		End of 18 Years		End of 19 Years		End of 20 Years	
	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks	Yrs	Wks
	21	4	27	6	35	8	38	10	38	12	45	15	6	17	25	19	47	22	16	24	46	26	33	29	1	31	2	32	51	33	48	34	33	36	12	Pd.
22	4	10	6	16	8	17	10	18	12	25	14	39	17	5	19	25	21	44	24	18	26	8	28	22	30	21	32	16	32	17	33	9	35	25	Pd.	up
23	3	48	6	0	7	51	10	0	12	8	14	21	16	39	19	5	21	23	24	43	25	35	28	44	29	40	32	33	32	43	33	52	34	39	Pd.	up
24	3	36	5	38	7	36	9	37	11	45	14	7	16	23	18	39	21	2	23	16	25	12	27	15	29	8	31	51	32	9	32	47	34	18	Pd.	up
25	3	27	5	27	7	24	9	25	11	33	13	45	16	8	18	23	21	35	23	43	25	42	27	38	28	29	31	17	31	14	32	35	34	25	Pd.	up
26	3	20	5	17	7	13	9	15	11	23	13	35	15	48	18	8	20	17	23	18	24	20	27	10	28	50	30	35	31	32	32	29	33	35	Pd.	up
27	3	14	5	9	7	5	9	7	11	15	13	25	15	36	17	46	20	35	23	46	24	0	27	35	27	19	29	2	30	51	32	26	32	16	Pd.	up
28	3	10	5	3	6	51	9	2	11	8	13	17	15	26	17	33	20	12	23	22	23	31	26	7	27	41	28	20	29	7	31	31	32	7	Pd.	up
29	3	6	4	50	6	47	8	49	11	2	13	10	15	16	17	19	19	5	22	50	23	11	26	32	27	10	27	39	29	32	30	16	32	22	Pd.	up
30	3	3	4	47	6	43	8	45	10	49	13	2	15	6	17	6	19	33	22	25	22	42	25	1	26	32	27	6	28	19	29	33	32	50	Pd.	up

Alternative Option of Paid-up Policy or Cash Surrender Value After Five Years. After premiums shall have been paid on this policy for five full years, then, in case of failure to pay any subsequent premium, if the holder hereof, instead of having the policy continued as extended insurance as above provided, shall elect in place thereof to avail himself of either one of the following options, and shall signify his preference by writing filed with the Company at its Home Office, while the extended insurance is in force and not later than thirteen weeks from the date to which the premiums shall have been paid, the Company will, upon surrender of the policy,—

OPTION 1.—Issue in exchange therefor a PAID-UP POLICY according to Table B, payable at the same time and on the same conditions as this policy.

TABLE B.																
Age at Issue	End of 5 Years	End of 6 Years	End of 7 Years	End of 8 Years	End of 9 Years	End of 10 Years	End of 11 Years	End of 12 Years	End of 13 Years	End of 14 Years	End of 15 Years	End of 16 Years	End of 17 Years	End of 18 Years	End of 19 Years	End of 20 Years
21	\$50	\$63	\$75	\$88	\$100	\$112	\$125	\$136	\$149	\$161	\$173	\$185	\$197	\$210	\$223	\$250
22	49	62	74	87	99	111	124	136	148	160	172	185	197	210	223	250
23	48	61	74	86	98	110	123	135	147	160	172	185	197	210	223	250
24	48	60	74	85	97	110	122	134	147	159	172	185	197	210	223	250
25	47	60	73	84	96	109	121	134	146	159	172	184	197	210	224	250
26	47	59	72	84	96	109	121	133	146	159	171	184	197	210	224	250
27	46	59	72	84	96	108	121	133	146	159	171	184	197	210	224	250
28	46	59	71	83	96	108	121	133	146	159	171	184	197	210	224	250
29	46	58	71	83	95	108	121	133	146	159	171	184	198	211	224	250
30	46	58	71	83	95	108	120	133	146	159	172	184	198	211	224	250

OPTION 2.—Or, with the written assent of the person to whom the policy is payable, pay the CASH SURRENDER VALUE according to Table C, within sixty days after written demand therefor.

TABLE C.																
Age at Issue	End of 5 Years	End of 6 Years	End of 7 Years	End of 8 Years	End of 9 Years	End of 10 Years	End of 11 Years	End of 12 Years	End of 13 Years	End of 14 Years	End of 15 Years	End of 16 Years	End of 17 Years	End of 18 Years	End of 19 Years	End of 20 Years
21	\$16.67	\$21.35	\$26.10	\$30.95	\$35.92	\$41.02	\$46.27	\$51.68	\$57.25	\$63.00	\$68.95	\$75.13	\$81.54	\$88.23	\$95.20	\$102.48
22	16.69	21.41	26.22	31.15	36.21	41.41	46.76	52.28	57.96	63.84	69.94	76.28	82.88	89.77	96.95	104.44
23	16.71	21.49	26.37	31.38	36.52	41.82	47.27	52.89	58.70	64.72	70.98	77.49	84.28	91.36	98.75	106.46
24	16.77	21.61	26.56	31.65	36.89	42.27	47.82	53.55	59.49	65.66	72.08	78.77	85.75	93.02	100.61	108.53
25	16.87	21.77	26.80	31.97	37.29	42.76	48.42	54.27	60.34	66.67	73.26	80.12	87.28	94.75	102.53	110.65
26	17.02	21.99	27.09	32.34	37.73	43.30	49.06	55.05	61.27	67.75	74.51	81.55	88.88	96.53	104.51	112.82
27	17.21	22.25	27.42	32.74	38.22	43.90	49.78	55.91	62.28	68.91	75.83	83.04	90.55	98.38	106.54	115.05
28	17.45	22.54	27.78	33.18	38.76	44.55	50.57	56.83	63.35	70.15	77.23	84.60	92.27	100.28	108.62	117.33
29	17.69	22.85	28.16	33.65	39.35	45.36	51.42	57.82	64.50	71.44	78.68	86.21	94.05	102.23	110.76	119.65
30	17.94	23.17	28.58	34.17	39.99	46.04	52.33	58.88	65.70	72.80	80.18	87.87	95.88	104.23	112.94	122.03

The figures in Tables A, B and C are for the end of the full paid policy year, on the assumption that there is no indebtedness then existing hereon. The figures for additional years will be furnished on request.

If neither the option of paid-up policy nor of cash surrender value be chosen as above provided, then the policy will be continued as extended insurance, subject to its terms.

This policy is based on reserves calculated upon the Standard Industrial Mortality Table with interest assumed at three and one-half per cent. The values and extension terms stated herein are the equivalents of the reserve at the end of each full paid policy year, less an amount not exceeding two and one-half per cent. of the full policy amount. They will be increased by a proportionate part of the difference between such reserve and that of the succeeding year for each thirteen weeks premiums paid beyond the full paid policy year, and will be lessened by deduction from such reserve of any indebtedness to the Company on or secured by the policy.

A paid-up policy issued under the terms hereof will have a surrender value which will be its net value at the date of the demand therefor, less any indebtedness on or secured by the policy; and if this policy shall become extended insurance after payment of premiums for five full years, it will have a surrender value, similarly determined, but decreasing and expiring with the extension term. The Company will pay such value within sixty days after written demand therefor, upon surrender of the policy, with the written assent of the person to whom it is payable.

Alterations, Erasures and Waivers. No modification, change or alteration hereof or endorsement hereon will be valid unless signed by the President, a Vice President, the Secretary or an Assistant Secretary, and no other person is authorized on behalf of the Company to make, alter or discharge this contract or to waive forfeiture. Agents are not authorized to waive any of the terms or conditions of this policy or to extend the time for payment of premiums or other moneys due to the Company, or to bind the company by making any promise not contained in this policy.

Payment of Premiums. If any premium shall not be paid when due, the Company's liability shall cease except as herein provided under "Period of Grace" and "Non-Forfeiture Benefits". Premiums hereon are payable at the Home Office of the Company in Boston, but may be paid to any of its authorized Agents, subject to the conditions of the policy. Should such Agent fail to call for any premium when due, it will be the duty of the Insured to make immediate payment of the premiums either to the District Office or to the Home Office. Failure of the Agent to collect premiums will not relieve the Insured from the obligation to pay the premiums when due, nor will the Company assume any liability for such failure. No payment of premium shall be valid unless entered in the Premium Receipt Book at the time of payment, by the Agent or other representative of the Company, authorized to receive it, nor if made when more than four weeks in arrears, except as herein provided under "Reinstatement".

Policy When Void. This policy shall be void: (1) if the Insured has been rejected for insurance by this or any other company, society or order; or has attended any hospital, or institution of any kind engaged in the care or cure of human health or disease, or has been attended by any physician, within two years before the date hereof, for any serious disease, complaint or operation; or has had before said date any pulmonary disease, cancer, sarcoma, or disease of the heart or kidneys; unless each such rejection, medical and hospital attendance and previous disease is specifically waived by an endorsement in the space for endorsement on Page 4 hereof signed by the Secretary; (2) or if an Industrial or Weekly Premium policy previously issued by this Company on the life of the Insured shall be in force on the date hereof or running as extended insurance, unless this policy bears an endorsement signed by the Secretary authorizing its continuance in addition to such previously issued insurance. The Company shall not be presumed or held to know of the issue of any prior policy or to know of any prior rejection.

Proof of Claim. In case of death of the Insured, proofs of claim shall be made on blanks to be provided by the Company and shall contain full answers of the claimant, physician and other persons to all the questions asked therein and shall conform to all the requirements thereof.

Refund of Premium. If this policy is not satisfactory, it may be returned within two weeks from its date, to the office of the Superintendent of the District and any premium paid will be refunded. If not so returned, the policyholder shall be deemed to have accepted the policy and to have agreed to be bound by its terms and conditions.

Disability from Loss of Sight or Limbs. If the Insured shall lose by severance both hands or both feet, or one hand and one foot, or lose permanently the sight of both eyes, while this policy is in full force and effect and while there is no default in the payment of premiums, total and permanent disability shall be deemed to exist, and one-half of the amount of insurance then payable in the event of death shall be paid immediately upon receipt by the Company of due proof of such loss. Thereafter, no further premium payments shall be required and the policy shall be endorsed showing the waiver of further premiums and providing for payment at the death of the Insured of the amount of insurance as specified in the schedule on Page 1. This provision is granted without additional cost to the Insured.

SPACE FOR ENDORSEMENTS MADE SUBSEQUENT TO DATE OF ISSUE.
