

STOCK DEPARTMENT

AGENCY AT SAVANNAH, GA.

CHARTER OAK LIFE INSURANCE CO., HARTFORD, CONN.

CAPITAL STOCK \$200,000, with a large surplus.

Securely invested under the official approval of the
Comptroller of Public Accounts of the State of
--- Connecticut. ----

SLAVE

POLICY

NO. 41 Annual Premium \$18.00 Sum Insured \$600 Term 1 yr

THIS POLICY OF INSURANCE WITNESSETH, that THE CHARTER OAK LIFE INSURANCE CO., In consideration of the sum of EIGHTEEN DOLLARS, to them in hand paid by Bertha Byck of Savannah, county of Chatham and State of Georgia, DO INSURE THE LIFE OF THE WITHIN NAMED SLAVE, for the term of twelve months, in the amount set opposite her name on the back hereof. Loss, if any, payable to the said Assured, her executors, administrators or assigns, as herewith described, according to the Application of said Bertha Byck bearing date the 19th day of May one thousand eight hundred and sixty and deposited in the Office of this Company.

AND THE SAID COMPANY DO HEREBY COVENANT AND BIND THEMSELVES, well and truly to pay to the said Bertha Byck as aforesaid, within ninety days after due notice and proof of the death of the within named Slave, the amount insured and set opposite the name of such as may decease, deducting therefrom all indebtedness on this Policy, if any, at that time: PROVIDED, she dies within the period embraced in this Policy, to wit: from twelve o'clock, (at noon,) on the 19th day of May one thousand eight hundred and sixty, until twelve o'clock, (at noon,) on the 19th day of May one thousand eight hundred and sixty one, for which said payment, the said capital with its accumulations is pledged.

AND IT IS HEREBY UNDERSTOOD AND EXPRESSLY DECLARED TO BE THE TRUE INTENT AND MEANING OF THIS POLICY, and the same is accepted by the Assured, that of the Application subscribed by the said Bertha Byck shall be in any respect untrue or incorrectly stated - or if the said slave shall die by her own hands, in any case, - - - or by any injury inflicted in an attempt to commit suicide - - - or by the hands of justice - - or in violation of law - - or by the hands of a mob - - or by a foreign invasion - - or by any insurrection - - or by the neglect, abuse, or maltreatment of the owner or any one to whom she shall be entrusted - - or shall be laboring under any chronic disease at the time of issuing this Policy - - or shall be forced, permitted or entreated by her owner, or by the agent of the owner, to engage in any combat causing her death - - or shall abscond or be kidnapped - - or shall, without the consent of this Company previously obtained and endorsed on or attached to this Policy, be taken or permitted to be taken to more Southern localities, (if South of the 35th degree North latitude,) than that in which insured, between the fifteenth day of July and the fifteenth day of November - - or engage the said Slave in any more hazardous occupations than those enumerated and set opposite her name - - or in the event of any previous insurance, existing without notice to this Company when the application was made, (or

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subsequent, without the consent of this Company previously obtained and endorsed on or attached to this Policy,) on the life of the within named Slave- - then, and in all such cases, the Company shall not be liable for the payment of the sum insured and set opposite the name of the said Slave, deceased, or any part thereof; and this Policy, so far as relates to said payment, shall be utterly void.

AND IT IS FURTHER AGREED, That in every case where this Policy shall cease or become, or be, null or void, all previous payments made thereon, shall be forfeited to the said Company. N.B. This Policy is not assignable without the consent of the Company, previously obtained and endorsed on or attached thereto; and the said Insurance may be cancelled by this Company, within two months from the date hereof, should they deem it advisable, by their returning to the Assured, the pro rata premium for the unexpired term.

IN WITNESS WHEREOF, The said CHARTER OAK LIFE INSURANCE COMPANY have, by their President and Secretary, signed and executed this Contract at the CITY OF HARTFORD, CONN., this twenty sixth day of May one thousand eight hundred and sixty but the same shall not be binding unless countersigned by Wilbur & Gleason Agents for the said Company at Savannah, Ga.

STATEMENT:

Premium \$18.00
Extra do.,
Policy 1.00
\$19.00

Signed: James C. Walkley, President.

Signed: Samuel H. White, Secretary.

Received Payment in full for the above Premium, and Countersigned this 26th day of May, 1860.

Signed: Wilbur & Gleason, Agents.

REGISTER OF THE SLAVE ASSURED IN THIS POLICY

<u>No.</u>	<u>Name</u>	<u>Age</u>	<u>Value</u>	<u>Amt. Risk</u>	<u>Rate</u>	<u>Premium</u>
1	Mary	34	\$900	\$600	3	\$18.00
	<u>Occupation</u>				<u>Remarks</u>	
	House Servant				Renewal	

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STOCK DEPARTMENT.

Agency at Savannah Ga.

No. of Policy, 41

SLAVE $\frac{3}{4}$ POLICY

CHARTER OAK LIFE INSURANCE CO.,
of Hartford, Conn.

Benefit of Bertha Byck

Date 19th day of May, 1860

Term of twelve months.

Number of the Insured, one

Amount Assured \$600

Premium. \$18.00

Extra do., , , 1.00

Charge for Policy. . 1.00
Total payment \$20.00

ENTERED

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Expires 19th day of May 1861

Issued 19th day of May 1860

Signed: Wilbur & Gleason, Agents.

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STATE DEPARTMENT

OFFICE OF THE SECRETARY

WASHINGTON, D. C.

STATE - FORM 17

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