FILE NAME: Metropolitan Life (ML)

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METROPOLITAN LIFE INSURANCE COMPANY

ACTUARIAL DIVISION

GROUP LIFE CLAIMS

ORDINARY
Form Act. 478
Aug. 1926
PRINTED IN U.S.A.

GROUP NUMBER: 43 dd

NAME OF GROUP: Johnson's Co.

NO.	SERIAL NO.	DATE INCURRED	SEX	COLOR	AGE	CAUSE OF DEATH OR DISABILITY	CODE NO.	AMOUNT
49		8/29			18	Pul. T.B. - Disability	351	1000
279		3/30			34	Ulcers of stomach - DIS.	411	1000
33		6/30			59	Complete Paralysis - "	376	1000
561		12/30			49	Congestion of lungs	107	1000
748		4/32			58	Cerebral Uremia	71	1000
791		8/32			55	Indigestion- gastritis	112	1000
912		7/33			20	T.B. of lungs	51	1000
981		1/34			59	Syncope, de coeur emphysema pulmonaire et de nephrite	107	1000
990		1/34			62	Cancer of rt. lung	41	1000
1003		3/34			65	T.B.	52	1000
1069		9/34			57	Angina Pectoris	93	500
1100		12/34			48	Angina de Poitrine	93	1000
					12	Claims Reported from 11/30/30 to 4/30/35		$ 12,000
								DUP
								5/26/35
277		3/29			52	Broken Spine	160	1000
346		8/29			66	Tumor of liver	41	1000
392		11/29			21	Tuberculosis	51	1000
400		12/29			19	Pneumonia	104	500
401		12/29			21	Accident	160	1000
408		12/29			26	Poisoning	192	1000
451		3/30			23	Hit by car	160	1000
452		4/30			51	Pneumonia	104	1000
474		5/30			25	Cause not Specified	209	1000
511		9/30			74	Cancer	41	1000
532		10/30			46	T.B. Pul		1000
						PENDING - DISABILITY		1000

PRODUCED SDNY MS

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