

which the insured received on the 14th day of September, 1901. Dr. Duncombe died suddenly on October 2nd, 1901, and, although the company paid his other claims, they refused to pay this one for the reasons before mentioned. In the course of the trial it was shown, in regard to the application and medical report upon which the policy was granted, which was signed by the examiner, and dated July 25th, 1901, that on that day no medical examination had been made. As a matter of fact, the examiner had not even seen Dr. Duncombe on that day. What really occurred was that Dr. Duncombe had filled up the first part of the medical examiner's report himself, and had then sent the papers to his professional friend, who filled up the balance, trusting to his recollection of the former examination made for the Federal for his facts. This, it would seem, might have been done, had the first examination on July 11th been made for this company. The fact, however, that the answers given to the two companies varied somewhat, led to a careful cross-examination by the counsel for the defence. In the midst of this the Judge asked how extensive an analysis had been made for the Federal on July 11th. The answer was that no urinalysis had been made at any time. It was further shown that on July 27th the report of the medical examination was posted to the company by the insured, who, on the same day, had consulted Dr. D. McLarty, of St. Thomas, as to his health. Dr. McLarty found him suffering from shortness of breath, pain under his left shoulder blade, and "an increased area of cardiac dulness," and his opinion was that he was suffering from pericarditis, with considerable effusion. Rest was advised. Other evidence showed he had complained of this pain in May, and continued to complain of it until his death. Early in August he went for a few days to Waterford. Here he was examined by another medical man. On September 2nd he came to Toronto, and was examined with the X-rays at Toronto General Hospital. On the evening of his death, October 2nd, 1901, he became suddenly weak and had to be laid down. There was no evidence of convulsion, no struggling, but when seen by Drs. McLarty and Van Buskirk a few minutes after the attack came on he was unconscious, breathing heavily with suffused face, and a little froth about the lips. The pulse was weak, and disappeared shortly afterwards. Death occurred in about half an hour after the attack came on.

There was no autopsy, but when the undertaker came to prepare the body for burial he noticed a swelling, raised up about three-quarters of an inch, "to the left side of the lower part of the sternum." Raising a fold of the abdominal wall, half way between the sternum and the umbilicus, he thrust the point of a long trocar through it, passed it eight inches upward and toward the left arm-pit, and drew off one and three-quarter pints of dark red