

APPLICATION FOR INSANITY INQUEST

TO THE JUDGE OF THE ^{CIRCUIT} ~~SUPERIOR~~ COURT OF Adams County, Indiana:

Your informant respectfully represents that one Minnie I. DeVor now residing in said county, is insane and a fit subject for custody and treatment in a State Hospital for Insane, as he verily believes, and he therefore asks that necessary steps be taken to examine into her condition, as the law provides in such cases. Your informant further states that to his best knowledge and belief, the legal settlement of said Minnie I. DeVor is in Indiana; that said came to Indiana from and became a resident of (Name) County This person's places of residence for three years prior to coming to Indiana were

In making this petition, I do hereby certify that I am a husband of said Minnie I. DeVor; that I am a legal resident of Adams (Citizen or Resident) County,

and that my address is 506 Studebaker Street, Decatur, Indiana

In case of emergency, notify Harold V. DeVor (Name and Address of relative or friend)
 Telephone 1063 Telegraph station

PERSONAL HISTORY

Of Minnie DeVor

Born (Month) March (Day) 15 (Year) 1906 Place Monroe, Ind.
 Color White Sex Female Married Yes Single Widowed Divorced Separated
 IF A WOMAN: Is she pregnant? No Number of children borne None Present age of youngest
 Has she passed menopause? No
 Birthplace of father Birthplace of mother
 If person is of foreign birth, give date of entry into the United States Port of entry
Steamship line Steamship
 If of foreign birth, is person naturalized?
 Education: None Reads only Reads and writes Common school
 High school Yes College Nurse Religion Occupation Nurse Where last
 employed and how long? Adams County Memorial Hospital
 Estate: Value None Nature
 Guardian: Name Harold V. DeVor Address 506 Studebaker
Decatur, Ind

HISTORY OF INSANITY

How long have you known this person? 18 years Have you known this person intimately? yes
 When was the first sign of insanity observed by you? 22 Dec. 1945
 What was the first sign of insanity observed by you? Effort to commit suicide
 Was the present attack gradual or sudden in its onset? Gradual
 State what leads you to believe this person is insane Attempting to commit suicide
 What moral deficiencies have been shown? None
 What was the mental and moral disposition in health? Good
 Number of previous attacks of mental disorder? None
 Has this person been a patient in any hospital for insane? Yes Where, when and how long? Mt. Mercy Sanitorium
and Lutheran Hospital
 Has this person suffered serious physical injury? No If so, give particulars
 Has this person suffered any serious illness? No State when and of what nature
 Has this person suffered any great mental shock or strain? Yes
 Has this person required feeding, seclusion or restraint? Yes Explain fully to preserve her life
 Has this person been addicted to any drugs? No Explain fully
 (Answer yes or no.) Is person paralytic? No Violent? No Destructive? No Excited? No
 Depressed? Yes Homicidal? No Suicidal? Yes Is there any physical defect or deformity? No
 Has person ever suffered from syphilis? No Has there been a Wasserman test? Yes Positive?
 Negative? Yes Does person indulge or has person indulged in any venereal excess? No
 Is person epileptic? No Was person feeble-minded in childhood? No

I have also received the following information from others relative to the patient's condition:

Subscribed and sworn to before me this

day of

19

M. D.

Notary Public

STATEMENT OF MEDICAL EXAMINER

I, H. F. Zwick M.D., of Decatur, Indiana in the County of Adams Indiana, do hereby certify that I am duly licensed to practice medicine in Indiana; that I am not related, by consanguinity or marriage, to Minnie I. DeVor of said County, who is alleged to be insane, and whom I have carefully and personally examined this 18 day of February 19 47 ; that I am of the opinion that s he is mentally ill and is a proper person for detention, care and treatment in a State Hospital; and that I have formed my opinion that he is mentally ill from the following facts observed by me. (Describe physical and mental conditions, appearance and

behavior of patient.) Rather poorly nourished but not workedly so. Well oriented as to time and place not hallucinated. Depressed-mainly on account of things that happened while husband was in service. Feels that she did wrong in business and financial things and this causes a situation that cannot be corrected.

Threatens suicide on frequent occasions. Restless and difficult to control at times. Has had at least two previous attacks - both of which were improved by shock therapy.

I have also received the following information from others relative to the patient's condition:

H. F. ZWICK

M. D.

Subscribed and sworn to before me this

18

day of February

19 47

(Seal)

Clyde O. Troutner Notary Public CO. Clerk

JUDGE'S ORDER OF COMMITMENT

In the matter of the application for the commitment of Minnie I. DeVor

to the Richmond State Hospital:

Comes now Harold V. DeVor who filed application for the commitment of Minnie I. DeVor to the Richmond State Hospital, alleging therein that said Minnie I. DeVor is a resident of Adams County and has her legal settlement in the State of Indiana, and is insane. And

having read such application and heard such other evidence as was deemed necessary to a full investigation of the facts stated in such application, I J. Fred Fruchte Judge of the Circuit Court of the County of Adams Indiana,

do hereby find and determine that the said Minnie I. DeVor is insane and is in need of hospital care, and do hereby order her committed to the Richmond State Hospital; and

this shall be sufficient warrant and authority for her admission, confinement and detention for care and treatment in said hospital until she shall be restored to health, or removed or discharged according to law. And the clerk of this court is hereby directed to apply forthwith to the superintendent of the Richmond State Hospital for the admission of the said

Minnie I. DeVor and to transmit with said application to said superintendent for his information, copies of all statements and certificates submitted, and to certify thereto under seal of this court.

J. Fred Fruchte Judge of the Adams

Circuit Court

STATE OF INDIANA

Adams COUNTY

SS:

I, Clyde O. Troutner

Clerk of the Circuit Court, and ex-officio

Clerk of the Superior Court of said county, do hereby certify that the foregoing is a true copy of the application, including statement of the attending physician, for the commitment of Minnie I. DeVor to the Richmond State Hospital; and the statements of the two medical examiners appointed by the court to examine said person, and the court's order of commitment in said matter.

In witness whereof, I hereunto set my hand and fix the seal of said court, this 19 day of February

Clyde O. Troutner

19 47

Clerk

(Seal)

[SEAL]

ACCEPTANCE OF APPLICATION

Transcripts of all the foregoing statements and certificates duly certified under the seal of the court were transmitted to the Superintendent State Hospital together with application for admission as a patient in said hospital and afterwards, to wit: On the day of 19 , an answer was received as follows:

To the Clerk of the Court, STATE HOSPITAL, County, Indiana: 19

The receipt of a transcript of the proceedings in the matter of the inquest as to the insanity of with application for the admission of said person into this Hospital, is hereby respectfully acknowledged. According to the provisions of an Act Concerning Insanity Inquests, etc., approved March 4th, 1907, the application is

ORDER OF COURT

M. D. Medical Superintendent

The receipt of the acceptance of the application for the admission of to the Court of State Hospital, as a patient was referred to the Judge of County, Indiana, and being fully advised he made an order directing that they so desire; and if they, or any of them, do not so desire, by a suitable attendant, or by the County Sheriff, together with assistants and a female attendant, if the patient be a female, as required by law and that due return be made of the complete execution of this order. Witness my hand and the seal of Court, County, this day of 19 Clerk P. O. Address of Patient St. Indiana.

SUPERINTENDENT'S RECEIPT

STATE HOSPITAL.

RECEIVED, this day of A. D. 19 the patient named in the above order of court M. D. Medical Superintendent

RETURN ON COMMITMENT

CAME TO HAND and committing to the 19 , and served by conveying the within named State Hospital, as shown by the Superintendent's receipt hereon endorsed this day of 19

ORDER OF DISCHARGE

HOSPITAL.

Form No. RICHMOND STATE HOSPITAL RICHMOND, IND. April 10, 1947 TO THE CLERK OF Adams County CIRCUIT COURT: THIS IS TO CERTIFY, PURSUANT TO THE PROVISIONS OF SEC. 2, CHAP. 363, ACTS 1933 THAT Minnie DeVor, A PATIENT OF THIS HOSPITAL, HAS BEEN DISCHARGED THIS 10th DAY OF April 19 47. IN MY OPINION, SAID PATIENT IS SUPPOSED TO HAVE BEEN DROWNED (suicide) WHILE ON VISIT. SAID PATIENT WAS COMMITTED TO THIS HOSPITAL February 19th, 1947. BY THE CIRCUIT COURT OF Adams COUNTY, IN ST ADDRESS AT THAT TIME BEING GIVEN AS 506 Studebaker Street, Decatur, Indiana (FILL OUT "1" OR "2" AND STRIKE OUT THE OTHER) 1. SAID PATIENT WAS RELEASED FROM THIS HOSPITAL March 28th, 1947 TO Dr. Harold DeVor AND IS NOW RESIDING AT 506 Studebaker St., Decatur, Indiana SEAL OF HOSPITAL E. C. Stuck M. D. SUBSCRIBED AND SWORN TO BEFORE ME THIS 10th DAY OF April 19 47 H. C. Stuck NOTARY PUBLIC MY COMMISSION EXPIRES November 20, 19 49