

19727

APPLICATION FOR INSANITY INQUEST

TO THE JUDGE OF THE **CIRCUIT SUPERIOR COURT OF** Adams County, Indiana:

Your informant respectfully represents that one **Russell Edward Tresp** 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 his condition, as the law provides in such cases. Your informant further states that to his best knowledge and belief, the legal settlement of said **Russell Edward Tresp** is in **French Twp., Adams Co., Indiana**; that said **Russell Edward Tresp** was born in ~~XXXXXXXXXXXXXX~~ **French Township Adams County, Indiana** on **December 6th 1916** and became a resident of **Adams 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 **Relative** of said **Russell Edward Tresp**; that I am a legal resident of **Adams County**, and that my address is **George Tresp, Marshall, Michigan and Herman Schug, Berne, Indiana**. In case of emergency, notify **Herman Schug, Berne, Ind.** Telephone **22094** Telegraph station

PERSONAL HISTORY

Of **Russell Edward Tresp**
Born (Month) **December** (Day) **6** (Year) **1916** Place **French Township, Adams Co., Ind.**
Color **white** Sex **Male** Married **No** Single **Yes** Widowed **no** Divorced **no** Separated **no**
IF A WOMAN: Is she pregnant? **No** Number of children borne **0** Present age of youngest **0**
Has she passed menopause? **No**
Birthplace of father **Vera Cruz, Ind.** Birthplace of mother **French Township, Adams Co., Ind**
If person is of foreign birth, give date of entry into the United States **No** Port of entry **No**
Steamship line **No** Steamship **No**
If of foreign birth, is person naturalized? **No**
Education: **None** Reads only **No** Reads and writes **No** Common school **Yes**
High school **Yes** College **No** Religion **None** Occupation **Farmer** Where last employed and how long? **Not employed**
Estate: Value **None** Nature **None**
Guardian: Name **None** Address **None**

HISTORY OF INSANITY

How long have you known this person? **George Tresp - all his life** Have you known this person intimately? **Yes**
When was the first sign of insanity observed by you? **Herman Schug - since 1933**
What was the first sign of insanity observed by you? **About 1948**
Was the present attack gradual or sudden in its onset? **Cursed his father, said his father did not know anything, threatened to burn the farm buildings.**
State what leads you to believe this person is insane? **Gradual**
What moral deficiencies have been shown? **the unusual way he acts and talks**
What was the mental and moral disposition in health? **He curses and swears when he does not get his own way, he flies into ungovernable temper and curses and swears and threatens those who talk to him.**
Number of previous attacks of mental disorder? **While he was in school he was a good student**
Has this person been a patient in any hospital for insane? **His father had trouble with him during his father's lifetime**
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? **Had trouble over a girl, also suffered hallucinations**
Has this person required feeding, seclusion or restraint? **No** Explain fully
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? **no** Homicidal? **no** Suicidal? **no** Is there any physical defect or deformity? **No, except**
Has person ever suffered from syphilis? **No** Has there been a Wasserman test? **no** Positive? **he is not**
Negative? **No** Does person indulge or has person indulged in any venereal excess? **no** you
Is person epileptic? **no** Was person feeble-minded in childhood? **no**

FAMILY HISTORY

Give name and address of following relatives. (If dead, state cause of death and age at death.)

	NAME	ADDRESS	IF DEAD	
			Cause	Age at Death
Father	Frank W. Tremp	dead	heart attach	Oct. 5 1950
Mother (Maiden Name)	Sarah Reinhart	dead	cancer	Sept 28 1928
Father's father	Leonard Tremp	dead		
Father's mother	Catherine Tremp	dead	Dropsy	March 1921
Mother's father	Fred Reinhart	dead		
Mother's mother	Fannie Reinhart	Linn Cove, Ind.		
Brother	Elmer Tremp	Richmond, Ind.		
	George Tremp	Marshall, Michigan		
Sister	Pearl Troy	Vera Cruz, Indiana		
	Bessie Schug	Berne, Indiana		

Which of person's parents, grandparents, brothers, sisters, uncles or aunts, if any (give name) ever had the following diseases:

Insanity	None	Epilepsy	None
Spasms	None	Fainting spells	None
Nervous prostration	None	Hysteria	None
Feeble-mindedness	None	Tuberculosis	None
Syphilis	None		

Was either of the person's parents or grandparents intemperate in the use of alcohol? No

Was either of person's parents or grandparents addicted to the use of opium, cocaine or other narcotics? no

The statement of Dr. Amos Reusser M. D., the attending physician, is filed herewith and made a part hereof.

The undersigned citizen of said county, upon oath, declares that the foregoing allegation, personal history, family history and history of persons's insanity, are true to the best of h knowledge and belief.

Subscribed and sworn to before me this 1st day of December 1951
(Seal) HERMAN SCHUG GEORGE TREMP
FERD L. LITTERER
Notary Public or County Clerk

My commission exp. July 1, 1954 STATEMENT OF ATTENDING PHYSICIAN

I, Amos Reusser M. D., of Berne, Indiana in the County of Adams Indiana, do hereby certify that I am licensed to practice medicine in the State of Indiana; that on the 24th day of April 1951 I did carefully and personally examine Russell Edward Tremp and believe h to be suffering from mental disease, and I am of the opinion that he is a proper person for admission to a State Hospital. I have observed the following facts regarding h mental and physical condition: He is backward in his mental development. Although he feels that he posses the right to his father's farm to do as he pleases. He has no sense of duty to obey the law. I know that he is mentally incapable of managing his own affairs.

I further certify that patient is free from any contagious disease and from vermin.

Subscribed and sworn to before me this 1st day of December 1951
AMOS REUSSER M. D.
FERD L. LITTERER
Notary Public

My commission expires, July 1, 1954

VACCINATION

This is to certify that the said by myself, or by another physician, to my positive knowledge within 60 days of this date.
Date 19

has been vaccinated for smallpox

M. D.

STATEMENT OF MEDICAL EXAMINER

I, G. J. Kohne 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 Russel E. Tremp of said County, who is alleged to be insane and whom I have carefully and personally examined this 2 day of Dec. 1951; that I am of the opinion that 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.) Low I.Q. acts and talks like a child - laughs constantly while talking. Has no delusions or illusions - knows difference between right and wrong. Apparently mentally deficient rather than mental disease.

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

Always acted queer and childish. Plays with toys and gets a kick out of child's pranks.

Subscribed and sworn to before me this 5 day of December

G. J. KOHNE M. D. 1951

EDWARD F. JABERG

STATEMENT OF MEDICAL EXAMINER

I, H. F. Zwick M. D., of Decatur, Ind. 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 Russell Edward Tresp of said County, who is alleged to be insane, and whom I have carefully and personally examined this 3rd day of December 19 51 ; that I am of the opinion that 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.)

From the examination alone I cannot state that this man is insane. His actions are peculiar. He is ill at ease -very slow in formulating answers to questions. His answers finally are pertinent but frequently rather evasive and quite shallow. He is oriented as to time and place. Has a fairly good idea of right and wrong. Although he stated that he had graduated from high school his actions suggest a lower mentality than this would suggest. He gave no good explanation for his actions leading up to his arrest.

I have also received the following information from others relative to the patient's condition: The history I received was very meager. He showed no definite paranoid tendencies but if frequent threats to others were showed added to the possible threats to the officers at his arrest - this would suggest that the individual is unstable enough mentally to constitute a danger to his neighbors.

Subscribed and sworn to before me this 5 day of December

H. F. ZWICK M. D.

19 51

EDWARD F. JABERG Clerk Adams Circuit Court

JUDGE'S ORDER OF COMMITMENT

In the matter of the application for the commitment of Russell Edward Tresp to the Richmond State Hospital: Comes now Herman Schug who filed application for the commitment of Russell Edward Tresp to the Richmond State Hospital, alleging therein that said Russell Edward Tresp is a resident of Adams County and has his 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 Myles F. Parrish Judge of the Circuit Court of the County of Adams Indiana, do hereby find and determine that the said Russell Edward Tresp is insane and is in need of hospital care, and do hereby order him committed to the Richmond State Hospital; and this shall be sufficient warrant and authority for his admission, confinement and detention for care and treatment in said hospital until he 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 Russell Edward Tresp 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.

MYLES F. PARRISH Judge of the Adams Circuit Superior Court

STATE OF INDIANA

ADAMS COUNTY } SS: I, Edward F. Jaberg 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 Russell Edward Tresp 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 18 day of December 19 51

EDWARD F. JABERG Clerk

[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 and afterwards, to wit: On the 30 day of Dec. 1951, an answer was received as follows:

RICHMOND STATE HOSPITAL Dec 29 19 51

To the Clerk of the Adams Counth Court, Adams County, Indiana:

The receipt of a transcript of the proceedings in the matter of the inquest as to the insanity of Russell Edward Tremp 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, 1927, the application is accepted.

PAUL D. WILLIAMS M. D. Medical Superintendent

ORDER OF COURT

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 St. Indiana. Clerk P. O. Address of Patient

SUPERINTENDENT'S RECEIPT

RECEIVED, this day of A. D. 19 the patient named in the above order of court STATE HOSPITAL 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

To the Clerk of the Court, Indiana 19 County, Indiana: According to the provisions of an Act Concerning Insanity Inquests, etc., approved March 4th, 1927, the proper authority has this day discharged of County, Indiana, heretofore an inmate of this Hospital; and you are hereby respectfully requested to cause removal to said County, agreeable to said Act. PROVIDED, That said removal has not otherwise been accomplished, as herein noted. N. B. Very respectfully, M. D. Medical Superintendent

ORDER FOR PATIENT'S RETURN

STATE OF INDIANA, COUNTY, ss: County, Greeting: To the Sheriff of a patient in the State Hospital, from this County, be removed from said Hospital. You are therefore hereby commanded forthwith to remove said patient and return to Township, in this County. WITNESS, my hand and the seal of the Court, this day of A. D. 19 Clerk

SHERIFF'S RETURN ON ORDER FOR PATIENT'S RETURN

CAME TO HAND 19, and duly served same by removing said patient to Township, in said County. This 19 Sheriff County