

#19728

APPLICATION FOR INSANITY INQUEST

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

Your informant respectfully represents that one John Samuel Cramer 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 John Samuel Cramer

is in Indiana; that said John Samuel Cramer ~~was born here~~ was born here ^(Date) ~~from~~ August 29, 1875 and became a resident of Adams County ^(Date) 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 wife of said John Samuel Cramer; that I am a legal resident of Adams County,

and that my address is 148 1/2 W. Monroe Street Decatur

In case of emergency, notify Mrs. John Samuel Cramer ^(Name and Address of relative or friend) Telephone None Telegraph station

PERSONAL HISTORY

Of John Samuel Cramer
Born (Month) August (Day) 29 (Year) 1875 Place Adams County, Indiana
Color White Sex Male Married Yes Single Widowed Divorced Separated
IF A WOMAN: Is she pregnant? Number of children borne Present age of youngest
Has she passed menopause?
Birthplace of father Pennsylvania Birthplace of mother Indiana
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 x Reads only Reads and writes Common school x
High school College Religion Protestant Occupation Painter & decorator Where last employed and how long? Seven years ago
Estate: Value None Nature
Guardian: Name Mrs. John Cramer Address 148 1/2 W. Monroe St. Decatur, Indiana

HISTORY OF INSANITY

How long have you known this person? 37 years Have you known this person intimately? Yes
When was the first sign of insanity observed by you? 1945
What was the first sign of insanity observed by you? Left home for a day at a time. Stole two bicycles, claimed those as his own, threatened to burn wife out of a home. watched every move of wife
Was the present attack gradual or sudden in its onset? Gradual
State what leads you to believe this person is insane His actions as stated above.
What moral deficiencies have been shown? Has stolen bicycles and fruit
What was the mental and moral disposition in health? Good
Number of previous attacks of mental disorder? Gradual since 1945
Has this person been a patient in any hospital for insane? No Where, when and how long?
Has this person suffered serious physical injury? Leg broken in 1917 so, give particulars
Has this person suffered any serious illness? Yes State when and of what nature Heart attack in 1942. Has had many severe colds.
Has this person suffered any great mental shock or strain? After quitting work, he gradually became worse.
Has this person required feeding, seclusion or restraint? Explain fully At times he has required feeding
Has this person been addicted to any drugs? No Explain fully
(Answer yes or no.) Is person paralytic? No Violent? At times Destructive? Excited? Yes
Depressed? No Homicidal? No Suicidal? No Is there any physical defect or deformity? No
Has person ever suffered from syphilis? No Has there been a Wasserman test? No Positive?
Negative? Does person indulge or has person indulged in any venereal excess? No
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	Uriah Cramer		Pneumonia	83
Mother (Maiden Name)	Mary Amrine		Old age	78
Father's father	Unknown		Unknown	
Father's mother	Unknown		Unknown	
Mother's father	Unknown		Unknown	
Mother's mother	Unknown		Unknown	
Brother	Frank Cramer		Anemia	58
Sister				

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

Insanity	Mr. Cramers father's father	Epilepsy	None to my knowledge
Spasms	None to my knowledge	Fainting spells	"
Nervous prostration	"	Hysteria	"
Feeble-mindedness	"	Tuberculosis	"
Syphilis	"		

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 G. J. Kohne 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 her knowledge and belief.

Grace Cramer

Subscribed and sworn to before me this 3rd day of December

19 51

Edward F. Jaberg
Notary Public or County Clerk

STATEMENT OF ATTENDING PHYSICIAN

I, G. J. Kohne M. D., of Decatur, 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 3rd day of December 19 I did carefully and personally examine John Cramer and believe him 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 his mental and physical condition: Irritability and quarrelsome -- lack of concentration -- forgets things -- and symptom complex of senility and arteriosclerotic degeneration.

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

Subscribed and sworn to before me this 3rd day of December

19 51

G. J. Kohne M. D.
Edward F. Jaberg
Notary Public

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, Roland Reppert 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 John Cramer of said County, who is alleged to be insane and whom I have carefully and personally examined this 4 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.) Arteriosclerotic senile dementia. Memory loss quite pronounced. Physical appearance is fairly good. Behavior pattern is typical of a senile dementia.

I have also received the following information from others relative to the patient's condition: Has stolen several bicycles, has become quite confused as to his whereabouts in town.

Subscribed and sworn to before me this 5th day of December

Roland Reppert M.D.
19 51

Edward F. Jaberg
Notary Public

STATEMENT OF MEDICAL EXAMINER

I, Arthur H. Girod 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 John Cramer of said County, who is alleged to be insane, and whom I have carefully and personally examined this 4th 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.) Physical care shows lack of care for appearance and clothing. Has loss of memory as to time and place. Answers are incoherent and slow. Actions show loss of purpose. Has marked hardening of the arteries.

I have also received the following information from others relative to the patient's condition: Becomes lost as to time and place. Forgets events of things even several minutes preciously.

Subscribed and sworn to before me this 5th day of December

Arthur H. Girod M.D.
19 51

Edward F. Jaberg
Notary Public

JUDGE'S ORDER OF COMMITMENT

In the matter of the application for the commitment of John Samuel Cramer to the Richmond State Hospital:
Comes now Grace Cramer who filed application for the commitment of John Samuel Cramer to the Richmond State Hospital, alleging therein that said John Samuel Cramer 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 Superior Court of the County of Adams Indiana, do hereby find and determine that the said John Samuel Cramer 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 John Samuel Cramer 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 Adams Circuit Superior Court
Judge of the

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 John Samuel Cramer 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 18th 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 State Hospital together with application for h admission as a patient in said hospital day of 19 , an answer was received as follows:

STATE HOSPITAL

19

To the Clerk of the

Court,

County, Indiana:

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, 1927, the application is

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 be conveyed to said hospital, either by a relative or relatives, or a friend or friends, if 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. P. O. Address of Patient

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 as shown by the Superintendent's receipt hereon endorsed this day of State Hospital, 19

ORDER OF DISCHARGE

STATE HOSPITAL

Indiana

19

To the Clerk of the

Court,

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:

To the Sheriff of

County, Greeting:

WHEREAS, the proper authority has directed that 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