

APPLICATION FOR INSANITY INQUEST

#20440

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

Your informant respectfully represents that one Elsie Mae Death 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 Elsie Mae Death is Adams Co. in Indiana; that said Elsie Mae Death came to Indiana August 28 -1896 from Birth and became a resident of Adams County August 28 - 1896 (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 Daughter of said Elsie Mae Death; that I am a legal resident of Adams County, and that my address is R # 3 Decatur, Indiana
In case of emergency, notify Myrtle Death or Mrs. George C. Daniels (Name and Address of relative or friend)
Telephone 7-7405 Telegraph station

PERSONAL HISTORY

Of Elsie Mae Death
Born (Month) August (Day) 28 (Year) 1896 Place Adams
Color White Sex Female Married Single Widowed Divorced Separated
IF A WOMAN: Is she pregnant? Number of children borne 4 Present age of youngest 30
Has she passed menopause? Yes
Birthplace of father Van Wert County, Ohio Birthplace of mother unknown
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 yes Common school
High school College Religion Occupation Housewife Where last employed and how long?
Estate: Value Nature
Guardian: Name Address

HISTORY OF INSANITY

How long have you known this person? 33 years Have you known this person intimately? yes
When was the first sign of insanity observed by you? June - 1956
What was the first sign of insanity observed by you? Felt she was sick mentally at times, was unable to reason at times
Was the present attack gradual or sudden in its onset? gradual
State what leads you to believe this person is insane She has threatened to harm members of family.
She told family that it was dangerous to be around her
What moral deficiencies have been shown?
What was the mental and moral disposition in health?
Number of previous attacks of mental disorder?
Has this person been a patient in any hospital for insane? No Where, when and how long? and broke her wrist in July 1956.
If so, give particulars
Has this person suffered serious physical injury? Fell in home/ If so, give particulars

Has this person suffered any serious illness? Yes State when and of what nature Irene Byron Hospital
at Ft. Wayne Ind 1949-1952 (Tuberculosis) 1946-1955 returned June 1956
Has this person suffered any great mental shock or strain? Yes, her son (Edward H) is in Marion Veterans Hospital/
Has this person required feeding, seclusion or restraint? Explain fully She would eat if the food was prepared for her.
Has this person been addicted to any drugs? No Explain fully
(Answer yes or no.) Is person paralytic? Violent? Destructive? Excited? Yes
Depressed? Yes Homicidal? Suicidal? Yes Is there any physical defect or deformity? Positive?
Has person ever suffered from syphilis? No Has there been a Wasserman test?
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	James Harman	Deceased	Stroke	55
Mother (Maiden Name)	Neva Johnson	Deceased	Killed in fall from tree	27
Father's father	unknown			
Father's mother	"			
Mother's father	"			
Mother's mother	"			
Brother -Half	Ray Marquardt	Deceased	Drowned	27
Sister				

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

Insanity Betty and Edward H	Epilepsy
Spasms	Fainting spells
Nervous prostration	Hysteria
Feeble-mindedness	Tuberculosis
Syphilis	

Was either of the person's parents or grandparents intemperate in the use of alcohol?

Was either of person's parents or grandparents addicted to the use of opium, cocaine or other narcotics?

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.

/s/ Myrtle J. Death

Subscribed and sworn to before me this 17 day of September, 1956

(SEAL)

Richard D. Lewton
 Notary Public or County Clerk

STATEMENT OF ATTENDING PHYSICIAN

I, G. J. Kohne M. D., of Decatur Ind in the County of Adams Indiana, do hereby certify that I am licensed to practice medicine in the State of Indiana; that on the 10th day of Sept. 1956 I did carefully and personally examine Elsie Mae Death and believe her to be suffering from mental disease, and I am of the opinion that she is a proper person for admission to a State Hospital. I have observed the following facts regarding her mental and physical condition: Periods of depression failure to do her own ordinary housework - Moderate neglect of personal attire and a fear of losing her mind

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

Subscribed and sworn to before me this 17th day of September

G. J. Kohne M. D., 1956

Richard D. Lewton

Clerk Adams Circuit Court

Com Expire 1-1-60

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, J. M. Burke M. D., of Decatur 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 Elsie Mae Death of said County, who is alleged to be insane and whom I have carefully and personally examined this 20 day of September, 1956; that I am of the opinion that she 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 she is mentally ill from the following facts observed by me. (Describe physical and mental conditions, appearance and behavior of patient.) A cute periods of depression, Melancholy, believes she is in hell & everyone else is, is slovenly, declares she is crazy and has caused death of her family. States she cannot be helped.

...said to have threatened ...
...probable potential parent of ...
...socially inadequate offspring likewise afflicted;

James N. Burr
M. D.
1956

Subscribed and sworn to before me this 27th day of September

Richard D. Lewton
Clerk Adams Circuit Court

STATEMENT OF MEDICAL EXAMINER

I, John C. Carroll, M.D., of Adams County, Indiana, who is alleged to be insane, and whom I have carefully and personally examined on the 20th day of Sept. 1956; that I am of the opinion that he is mentally ...
...very depressed, believes she "has gone crazy" and is responsible for the death of her family. Believes she is now in hell.

I have also received the following information from others relative to the patient's condition: Apparently she has audio ...
...I hereby state in my opinion, said Elsie Mae Death is not the probable potential parent of mentally incompetent or socially inadequate offspring likewise afflicted.

John C. Carroll
M. D.

Subscribed and sworn to before me this 20 day of September, 1956

Richard D. Lewton
Clerk Adams Circuit Court

JUDGE'S ORDER OF COMMITMENT

In the matter of the application for the commitment of **ELSIE MAE DEATH** to the **RICHMOND** State Hospital; No. 20440
Comes now **Nyrtle J. Death** who filed application for the commitment of **Elsie Mae Death** to the **Richmond** State Hospital, alleging therein that said **Elsie Mae Death** is a resident of **Adams** County and has 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 **Nyles F. Parrish** Judge of the **Adams** Circuit Court of the County of **Adams** Indiana, do hereby find and determine that the said **Elsie Mae Death** 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 **Elsie Mae Death** 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.

Nyles F. Parrish
Judge of the Circuit Superior Court

STATE OF INDIANA

Adams COUNTY } SS:
I, **Richard D. Lewton** 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 **Elsie Mae Death** 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 26th day of September 1956

Richard D. Lewton
By Cecile Krick - Deputy 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 Richmond State Hospital together with application for admission as a patient in said hospital and afterwards, to wit: On the 1st day of October 19 56, an answer was received as follows:

RICHMOND STATE HOSPITAL SEPTEMBER 26 19 56

To the Clerk of the ADAMS COUNTY Circuit Court, County, Indiana:

The receipt of a transcript of the proceedings in the matter of the inquest as to the insanity of Elsie Mae Death Adams County 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

This patient may be admitted on 2, 3, 4 of October 1956 PROVIDED VACCINATION CERTIFICATE ACCOMPANIES Between the hours of 9:00 A.M. and 11:00 A.M. or 1:00 P.M. and 4:00 p.m. J Klepfer M.D. Medical Superintendent

ORDER OF COURT

The receipt of the acceptance of the application for the admission of State Hospital, as a patient was referred to the Judge of Court 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. Clerk 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 day of 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

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