APPLICATION FOR INSANITY INQUEST

Adams

County, Indiana;

Your informant respectfully represents that one Sertha Weaver now residing in said county, is insume and a fit subject for custody and treatment in a State Hospital for Insume, as he verily believes,

and he therefore asks that necessary steps be taken to examine into A or condition, as the law provides in such cases. Your in-

formant further states that to his best knowledge and belief, the legal settlement of soil Bertha Weaver

in Implement that said 53

Bertha Weaver

come to Indiana 1884

PERSONAL PROPERTY.

and became a resident of

Wilming")

(Dalte)

Birth

This person's places of residence for three years prior to coming to Indiana were

(Palo)

1886

In making this petition, I do hereby certify that I am a Brother

(Sphilite or Friend)

वर्ग उपानि

; that I am a legal resident of

Adams

(VAMMA) M.

and that my address is Geneva, Ind.

In case of emergency, notify Gilbert L. Buckey

Geneva, Indiana

(Name and Address of relative or friend)

Telephone

Telegraph station

PERSONAL HISTORY

Bertha B. Weaver

Born (Month)

white Sex female Married

(Day) 1h

(Lear)

Simple

1884 Place

Adams Col Ind.

Separated

IF A WOMAN: Is she pregnant?

no

Number of children borne

5

Present age of youngest hh

Has she passed menopause?

Birthplace of father

Adams Co. Indiana

Birthplace of mother

Widowed

Adams Co. Indiana

If person is of foreign birth, give date of entry into the United States

Port of entry

Steamship line

Steamship

Direrred

If of foreign birth, is person naturalized?

Education: None

Reads only

Reads and writes

Common school

8

High school

College

Religion Protestant Occupation

housewife

Where last

employed and how long?

Jay Garment Portland Ind.

Guardian: Name

Estate: Value

Address

5 years

HISTORY OF INSANITY

How long have you known this person? 44 yrs. Have you known this person intimately? son When was the first sign of insanity observed by you? After her husband died. What was the first sign of insanity observed by you? Didn't know or would'nt admit that her husband had died.

Nature

Was the present attack gradual or sudden in its onset? has grown steadily worse from the time her husband didd. State what leads you to believe this person is insane doesn't know her children doesn't know how to control herself.

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 insanc?

Where, when and how long?

Has this person suffered serious physical injury? slight heart attack

If so, give particulars

Has this person suffered any serious illness?

State when and of what nature

Has this person suffered any great mental shock or strain? Has this person required feeding, seclusion or restraint? yes

when her husband died, 1957 Explainfully she will not eat unless food is

given to her on a plate. Has this person been addicted to any drugs hone Explain fully

(Answer yes or no.) Is person paralytic? Depressed? Homicidal? Has person ever suffered from syphilis? no

Violent? none Swieidal?

Destructive? Is there any physical defect or deformity?

Excited?

Has there been a Wasserman test? no Negative? Does person indulge or has person indulged in any venereal excess? Is person epileptic? Was person feeble-minded in childhood?

FAMILY HISTORY

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

	NAME	ADDRESS	IF DEAD	
			Свине	Age at Death
Father	MArion Buckey		Old Age	91
Mother (Maiden Name)	Mary Buckey		Old Age	92
Father's father	George Washington Buckey		Lung Fever	48
Father's mother	Cynthia Kelly		not known	42
Mother's father	James Kelly			
fother's mother	Malindia Kelley			
trother	Harvey Buckey Gilbert Buckey	Geneva, Indiana	Arthritus Heart trouble	68
ster	Pearl Grace Lafette Buckey	Wicksburg, Mithigan R. R. Muncie, Indiana		
	Ella Viola Buckey		Exzema	1 yr

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

Pearl Buckey Vicksburg, Mich.

Nervous prostrationnone

Hysteria none

Feeble-mindednessnonw

Tuberculosis none

Syphilis

none

Was either of the person's parents or grandparents intemperate in the use of alcohol? none

12

Was either of person's parents or grandparents addicted to the use of opium, cocaine or other narcotics? none

The statement of Gilbert L. Buckey

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 is knowledge and belief.

Subscribed and sworn to before me this

day of

June

19 59

Notary Public or County Clerk

STATEMENT OF ATTENDING PHYSICIAN

C. P. Hinchman M. D., of Geneva in the County of Adams Indiana, do hereby certify that I am licensed to practice medicine in the State of Indiana; that on day of June 19 59 I did carefully and personally examine Bertha B. Weaver and believe her to be suffering from mental disease, and I am of the opinion that s he is a proper person for admission to a State Hospital. I have observed the following facts regarding her mental and physical condition: Total loss of her mental facilies at periods of time. Failure to recognize her own children. Bouts of anger and temper to point of destroying her personal belongings and threats of violence to her children and grand children. Inability to care for her personal wellbeing or to controll her bowels in urine in the property of the personal wellbeing or to controll her bowels as well as C. P. Hinchman M.D.

Subscribed and sworn to before me this 9

day of

June

19 59

Otis S. Buckey

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

has been vaccinated for small pox

M. D.

STATEMENT OF MEDICAL EXAMINER

Norman E. Beaver M. D., of in the County of Berne Indiana, do hereby certify that I am duly licensed to practice medicine in Indiana; that I am not related by consanquinity or marriage Bertha Weaver of said County, who is alleged to be insane and whom I have carefully and personally examined this 19th day of sheis mentally June 19 59 : that I am of the opinion that ill and is a proper person for detention, care and treatment in a State Hospital; and that I have formed my opinion that s he is mentally ill from the following facts observed by me. (Describe physical and mental conditions, appearance and behavior of patient.) General arteuosileratic deterioration - especially cerebral. Poor orientation as to time, poor memory does not remember birth year, present year, or present month, or birthday. Judgment and reasoning also impaired; she also has feelings of persecution- people not treating her right. Complete lack of responsibility, personality change, with roaming away from home, and attacks of temper with threats of physical violence, suicide, homicide, and physical violence, also with fighting stremiously when her wishes not obeyed.

State Hospital;

1959

Clerk

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

(SEAL) s/ Norman E. Beaver M, D.Subscribed and sworn to before me this day of June 19 59 s/ Richard D. Lewton STATEMENT OF MEDICAL EXAMINER Howard M. Luginbill M. D., of Indiana, do hereby certify that I am duly licensed to practice medicine in Indiana; that I am not related, by consanguinity or marriage, Bertha Weaver of said County, who is alleged to be insane, and whom I have carefully and personally examined this 19 day of June 19 59 ; that I am of the opinion that she is mentally a proper person for detention, care and treatment in a State Hospital; and that I have formed my opinion that ill and is mentally ill from the following facts observed by me. (Describe physical and mental conditions, appearance and s he is The patient is an elderly white female who appears to be opathetic and behavior of patient.) disinterested in her status. There is general arteriosclerotic deterioration, particularly cerebral, evidenced by lack of judgment and reasoning power, disorientations, and severe memory loss. She is hostile to those who try to help her. She cannot be trusted alone, for fear of what she may do to harm herself or things wround her. She has shown acts of violence to her own children without provocation. She refuses ; to cooperate even on usual routine matters for her own care or welfare. She is nearly always confused and cannot be relied on. I have also received the following information from others relative to the patient's condition: s/ Howard M. Luginbill M, D.Subscribed and sworn to before me this 19 day of June 59 Richard D. Lewton (SEAL) JUDGE'S ORDER OF COMMITMENT In the matter of the application for the commitment of Bertha B. Weaver Richmond to the State Hospital: Comes now Gilbert L. Buckey who filed application for the commitment of Bertha B. Weaver Richmond to the State Hospital, alleging therein that said Bertha B. Weaver is a resident of Adams County and has legal settlement in the State of Indiana, and is insane. And her 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 Indiana, do hereby find and determine that the said Bertha B. Weaver insane and is in need of hospital care, and do hereby order h. er 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 Bertha B. Weaver 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. s/ Myles F. Parrish (SEAL) Judge of the STATE OF INDIANA SS: Adams Clerk of the Circuit Court, and ex-officio Richard D. Lewton Clerk of the Superior Court of said county, do hereby certify that the foregoing is a true copy of the application, including statement

In witness whereof, I hereunto set my hand and fix the seal of said court, this June day of [SEAL] s/ Richard D. Lewton

and the statements of the two medical examiners appointed by the court to examine said person, and the court's order of commit-

to the

Richmond

Adams Circuit Court

of the attending physician, for the commitment of Bertha B. Weaver

ment in said matter.

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 h er admission as a patient in said hospital Richmond day of 1201 1779 , an answer was received as follows:

STATE HOSPITAL

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

> //#//#//#####////
> Medical Superintendent M. D.

ORDER OF COURT

The receipt of the acceptance of the application for the admission of Bertha B. Weaver

Richmond State Hospital, as a patient was referred to the Judge of to the Adams CircuitCourt of County, Indiana, and being fully advised he made an order directing that Adams be conveyed to said hospital, either by a relative or relatives, or a friend or friends, if Bertha B. Weaver

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 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.

Adams Circuit County, this Witness my hand and the seal of Court, 19 59 June s/ Richard D. Lewton 26th day of St. (SEAL) P.O. Address of Patient

SUPERINTENDENT'S RECEIPT

and afterwards, to wit: On the

STATE HOSPITAL

A. D. 19 59 the patient named in the above order of court July RECEIVED, this day of 20

> s/ J. Klepfer M. D. Medical Superintendent

RETURN ON COMMITMENT

1959 , and served by conveying the within named July 20th CAME TO HAND State Hospital, and committing Richmond her to the Bertha B. Weaver July 1959 as shown by the Superintendent's receipt hereon endorsed this 20th day of

s/ Merle Affolder
Sheriff, Adams County, Indima

County, Indiana, heretofore an inmate of this

ORDER OF DISCHARGE

STATE HOSPITAL

19

Clerk

Indiana

19

County, Indiana: Court, To the Clerk of the

According to the provisions of an Act Concerning Insanity Inquests, etc., approved March 4th, 1927, the proper authority has this day dis-

removal to said County, agreeable to said Act. Hospital; and you are hereby respectfully requested to cause

of

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

charged

County, Greeting:

a patient in the WHEREAS, the proper authority has directed that 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

day of Court, this

A. D. 19

Clerk

SHERIFF'S RETURN ON ORDER FOR PATIENT'S RETURN

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

County Sheriff This 19