

APPLICATION FOR INSANITY INQUEST

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

Your informant respectfully represents that one Goldie Yoder 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 Goldie Yoder

is in Indiana; that said Goldie Yoder came to Indiana birth (Date) from birth (Date) and became a resident of Adams County. This person's places of residence for three years prior to coming to Indiana were

That his present address is 424 Center St., Berne, Indiana

In making this petition, I do hereby certify that I am a Brother (Relative or Friend) of said Goldie Yoder; that I am a legal resident of Allen County,

and that my address is 2311 S. Wayne, Ft. Wayne, Indiana.

In case of emergency, notify Mrs. Noah Ellenberger, Berne, Indiana. (Name and Address of relative or friend)

Telephone 2092 (Berne) Telegraph station

PERSONAL HISTORY

Of Goldie Yoder

Born (Month) Sept. (Day) 16th (Year) 1915 Place Adams Co., Indiana

Color White Sex Fem. Married No. Single Yes Widowed Divorced Separated

IF A WOMAN: Is she pregnant? No. Number of children borne Present age of youngest

Has she passed menopause? No.

Birthplace of father Adams Co., Indiana Birthplace of mother Adams Co., 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 Reads only Reads and writes Yes Common school Yes

High school College Religion Mennonite Occupation Restaurant Employee Where last employed and how long? City Lunch, - Berne, Indiana 8 months.

Estate: Value 1/2 share of fifty acre farm. Nature

Guardian: Name Address

HISTORY OF INSANITY

How long have you known this person? All life Have you known this person intimately? yes.

When was the first sign of insanity observed by you? Oct. 21, 1944.

What was the first sign of insanity observed by you? Fear, is delirious at times. Requires restraint.

Was the present attack gradual or sudden in its onset? Sudden

State what leads you to believe this person is insane Above reasons.

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? No Where, when and how long?

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-death of father-entering of service of brother.

Has this person required feeding, seclusion or restraint? Yes Explain fully Has required feeding-also restraint.

Has this person been addicted to any drugs? No. Explain fully

(Answer yes or no.) Is person paralytic? No Violent? No Destructive? No Excited? Yes

Depressed? Yes 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	David Yoder		Complications	75
Mother (Maiden Name)	Emma Luginbill		Heart attack	66
Father's father	Christian Yoder			
Father's mother	Christine Yoder			
Mother's father	Christine Luginbill			
Mother's mother	Luginbill			
Brother	Ervin Yoder	U. S. Army		
Sister				

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

Insanity *Epilepsy*
 Spasms *Fainting spells*
 Nervous prostration Uncle, David Luginbill *Hysteria*
 Feeble-mindedness Uncle, Henry Luginbill *Tuberculosis* Grandfather- Christian Luginbill
 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 C. C. Rayl 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 his knowledge and belief.

Subscribed and sworn to before me this 30th day of Oct. 19 44
 (Seal)

ERVIN YODER

19 44

CLYDE O. TROUTNER
 Notary Public for County Clerk

STATEMENT OF ATTENDING PHYSICIAN

I, C. C. Rayl 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 24 day of Oct. 1944 I did carefully and personally examine Goldie Yoder 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: She has a religious complex. She has illusions and delusions. Can't be left alone.

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

Subscribed and sworn to before me this 30 day of Oct. 19 44.
 (Seal)

C. C. RAYL

M. D.

19 44.

CLYDE O. TROUTNER
 Notary Public Clerk

VACCINATION

This is to certify that the said Goldie Yoder has been vaccinated for smallpox by myself, or by another physician, to my positive knowledge within 60 days of this date.
 Date 11/2 19 44

C. C. RAYL

M. D.

STATEMENT OF MEDICAL EXAMINER

I, Myron L. Habegger M. D., of Berne 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 Goldie Yoder of said County, who is alleged to be insane and whom I have carefully and personally examined this 31st day of Oct. 19 44; 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.) Has to be restrained in bed. Will not talk or eat at times.

I have also received the following information from others relative to the patient's condition: Also has a religious complex, of thinking she should be a missionary and also thinking her relatives are not Christians. Has fear of persecution.

I certify that in my opinion, said Goldie Yoder is the probable potential parent of mentally incompetent or socially inadequate offspring likewise afflicted.

Subscribed and sworn to before me this 31" day of Oct. 1944 MYRON L. HAEGGER M. D.

(Seal)

CLYDE O. TROUTNER Clerk

STATEMENT OF MEDICAL EXAMINER

I, Amos Reusser M. D., of Berne 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 Goldie Yoder of said County, who is alleged to be insane, and whom I have carefully and personally examined this 31" day of Oct. 19 44 ; 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.) Seclusive-Will not talk nor eat. (Family History): Paternal-one aunt was insane. Maternal- 2 uncles insane, 2 cousins insane, three cousins, imbeciles, one brother-Creton , one aunt insane.

I have also received the following information from others relative to the patient's condition: Sex disturbance is disappointed because she has no man.

I certify that, in my opinion, said Goldie Yoder is the probable potential parent of mentally incompetent or socially inadequate offspring likewise afflicted.

Subscribed and sworn to before me this 31 day of Oct. 19 44. AMOS REUSSER M. D. (Seal)

CLYDE O. TROUTNER, CLERK

JUDGE'S ORDER OF COMMITMENT

In the matter of the application for the commitment of Goldie Yoder to the Richmond State Hospital: Comes now Ervin Yoder who filed application for the commitment of Goldie Yoder to the Richmond State Hospital, alleging therein that said Goldie Yoder 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 Goldie Yoder 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

Goldie Yoder 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. The court finds that the best interest of society and of said Goldie Yoder will be served by her sexual sterilization. It is therefore ordered, adjudged and decreed by the court that the superintendent of said Richmond State Hospital be and he is hereby authorized to have performed upon said Goldie Yoder the operation of salpingectomy of any other more suitable operation or treatment having sure sterilizing results.

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 Goldie Yoder 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 2 day of Nov. 1944 [SEAL] CLYDE O. TROUTNER, Clerk

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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 17 day of January 1945, an answer was received as follows:

Richmond STATE HOSPITAL Jan. 10 19 45

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

The receipt of a transcript of the proceedings in the matter of the inquest as to the insanity of Goldie Yoder 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 hereby accepted provided a full list of clothing as listed on the accompanying requisition is brought with the patient, etc.

PAUL D. WILLIAMS M. D. Medical Superintendent

ORDER OF COURT

The receipt of the acceptance of the application for the admission of Goldie Yoder to the Richmond State Hospital, as a patient was referred to the Judge of Adams Circuit Court of Adams County, Indiana, and being fully advised he made an order directing that Goldie Yoder 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 1 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 Adams Circuit Court, Adams County, this 19 day of January 1945. CLYDE O. TROUTNER Clerk P. O. Address of Patient St. Indiana.

SUPERINTENDENT'S RECEIPT

Richmond STATE HOSPITAL

RECEIVED, this 20th day of January A. D. 19 45 the patient named in the above order of court

PAUL D. WILLIAMS M. D. Medical Superintendent

RETURN ON COMMITMENT

CAME TO HAND Goldie Yoder January 19 1945, and served by conveying the within named as shown by the Superintendent's receipt hereon endorsed this 20th day of January 19 45

Sheriff Fees-----\$16.84
Mileage----- 11.84
Lady Ass't.----- 5.00
\$16.84

LEO T. GILLIG, Sheriff of Adams County, Ind.

ORDER OF DISCHARGE

STATE HOSPITAL

Richmond, Indiana May, 31 1946

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

According to the provisions of an Act Concerning Insanity Inquests, etc., approved March 4th, 1927, the proper authority has this day discharged Goldie Yoder of Adams County, Indiana, heretofore an inmate of this Hospital; and you are hereby respectfully requested to cause her removal to said County, agreeable to said Act.

PROVIDED, That said removal has not otherwise been accomplished, as herein noted.

N. B.

Very respectfully,

O. R. LYNCH, 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 Township, in said County. 19, and duly served same by removing said patient to

This 19 Sheriff County