Sheriff's Warrants

Publication/Creation

1902

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any special institution for treatment.

James Ritchie
M.D. Toronto

16 April 1909

DGH1/5/1/1/55/1

Copy

Rose Lodge.
Bradda Mount
Douglas. I.O.M.
April 22nd 1908.

I certify that I have often met and conversed with Mrs Amelia Alexander; that she is of sound mind and capable of taking charge of her own affairs.

T. A. Woods,
M.A., M.B.

Amelia Alexander 5857
ad. 30 May 1902

DGH1/5/1/1/55/1

22 CHARLOTTE SQUARE
EDINBURGH
TELEPHONE 2250

16 April 1909

I hereby certify that I have this day medically examined Mrs Davis A. Lisle, 18 Learmonth Terrace Road, Edinburgh, formerly under treatment in the Crichton Royal Institution, that I find his mental condition improved and that in my opinion he does not require to live in any special institution for treatment.

James Rutherford
M.D. F.R.C.P.

DATED at Edinburgh, this Twentieth day of January.

One Thousand Nine Hundred and Nine.

Notices to be sent by Superintendents in connection with Probationary Sanctions:—

(1.) *Notice of Patient leaving Asylum.*

(2.) *Notice of Patient returning to Asylum, if replaced.*

(3.) *Notice of any Sanction not acted on.*

See Rules on other side.

Ltd—1000—11-06

any special institution for treatment.

James Ritchie
M.D. Toronto

16 April 1909

David Anderson M.A.
No. 8859
ad. 3 June 1902

D&H/5/1/29/2

22 CHARLOTTE SQUARE
EDINBURGH
TELEPHONE 2250

I hereby certify that I have this day medically examined Mr David A. Sillar, 18 Mansion-house ~~Road~~, Edinburgh, formerly under treatment in the Cricleton Royal Institution, that I find his mental condition improved and that in my opinion he does not require to live in any special institution for treatment.

James Ritchie
M.D. F.R.C.P.

16 April 1909

One Thousand Nine Hundred and Nine.

Notices to be sent by Superintendents in connection with Probationary Sanctions :—

(1.) *Notice of Patient leaving Asylum.*

(2.) *Notice of Patient returning to Asylum, if replaced.*

(3.) *Notice of any Sanction not acted on.*

See Rules on other side.

1,646—1000—11-08

by name just telling him what I have done & sending him a copy of enclosed certificate. Will you have the goodness to return the first one to me

Dr Cruchton Royal Institution

I remain yours truly
Alex Ritchie

Stiles's condition. I called at this house with the view of withdrawing it & substituting for it

one more in accordance with my conviction. I found that Mr. Miles is not at home, but at Dumfries.

I have communicated with Dr. John Fraser & learn from him that I am perfectly in order in asking you to substitute the Certificate which I enclose herewith for the one which you will doubtless receive from Mr. Miles. I thought it probable that Mr. Miles would send the Certificate to the Commissioners, but Dr. Fraser has informed me that he will send it to you. I am writing to Mr. Miles by same post telling him what I have done & sending him a copy of enclosed certificate. Will you have the goodness to return the first one to me

I remain Yours truly
Alex Ritchie

Dr. Easterbrook
Crichton Royal Institution

22 CHARLOTTE SQUARE
EDINBURGH
TELEPHONE 2250

16 April 1909

Dear Dr. Easterbrook

This afternoon Mr. David Miles, 18 Mansionhouse Road, called & shewed me a letter which his mother had received from the Commissioners in Lunacy requiring a Certificate of his mental condition.

I wrote & gave him a certificate. I was rather pressed for time & since writing it I feel that it does not express my view of Mr. Miles's condition. I called at his house with the view of withdrawing it & substituting for it

One Thousand Nine Hundred and Nine.

Notices to be sent by Superintendents in connection with Probationary Sanctions :—

(1.) *Notice of Patient leaving Asylum.*

(2.) *Notice of Patient returning to Asylum, if replaced.*

(3.) *Notice of any Sanction not acted on.*

See Rules on other side.

1,648—1000—11-08

DGHI/5/1/1/55/3

David Anderson Milne
no. 8889
ad. 3 June 1902

No. 6142.

SANCTION BY THE GENERAL BOARD OF LUNACY FOR LIBERATION OF A PATIENT ON TRIAL.

An Application having been made to the General Board of Commissioners in Lunacy, and having been duly considered, for the liberation on trial of David Anderson Milne a Patient in Crichton Royal Institution, Dumfries, together with the accompanying Statement and Medical Certificate, I hereby, by Authority of the Board, sanction the liberation of the said Patient until 20th April 1909.

John Macpherson
Commissioner in Lunacy.

Dated at Edinburgh, this Twentieth day of January, One Thousand Nine Hundred and Nine.

Notices to be sent by Superintendents in connection with Probationary Sanctions:—

(1.) *Notice of Patient leaving Asylum.*

(2.) *Notice of Patient returning to Asylum, if replaced.*

(3.) *Notice of any Sanction not acted on.*

See Rules on other side.

Ltd—1000—11-08

RULES FOR THE REMOVAL ON PROBATION OF PATIENTS IN ASYLUMS.

The object of these Rules is to furnish Inspectors of Poor and others with the information necessary to enable them to apply for the removal of Patients from Asylums on trial; to point out the steps which the General Board of Lunacy require shall be taken for their proper care during the period of trial; and to indicate the course to be adopted on the expiry of the period.

1. Application for the sanction of the Board for the Removal of Patients, whether Private or Pauper, on Probation shall be made according to Form G.

2. No Patient sent to an Asylum at the instance of the Procurator-Fiscal shall be liberated on Probation without his concurrence.

3. Pauper Lunatics removed on Probation shall be visited, once in every three months, by a medical man appointed by the Parish Council, who shall record his visits in the Visiting Book for Pauper Patients in Private Dwellings, which may be procured from Messrs. CONSTABLE, 11 Thistle Street, Edinburgh. It is very desirable that the first visit should be made within three weeks after the removal of the Patient from the Asylum.

4. During the period of Probation, Pauper Lunatics remain subject to visitation by the Commissioners, and all the Board's instructions in regard to them shall be carried out as in the case of Patients placed permanently with their sanction in Private Dwellings.

5. A Patient on Probation cannot, during the currency of the probationary period, be removed from the Poor Roll, nor can any of the conditions on which sanction was granted be altered, without the sanction of the Board.

6. On the order of the Board, or on an entry being made by the Parochial Medical Officer that a Pauper Patient has ceased to be suitable for remaining out on Probation, the Inspector shall, within fourteen days thereafter, remove him back to the Asylum, and send notice to the Board that this has been done.

7. When for any reason it is deemed necessary to send a Patient on Probation back to the Asylum, the Superintendent is bound to receive him on the simple demand for admission, provided the period of Probation is still current.

8. When a Patient on Probation, whether Private or Pauper, is certified recovered during the currency of the probationary period, a notice similar to what is required in the case of Lunatics in Private Dwellings under the Board's permanent sanction should at once be sent to the Board, and also to the Medical Superintendent of the Asylum from which the Patient was liberated.

9. In the event of the death of a Patient taking place during the currency of the probationary period, intimation should be at once sent to the Medical Superintendent, with a Medical Certificate as to the cause of death.

10. Before the period of Probation expires, in the case both of Private and Pauper Patients, if notice is not given to the Board that the Patient is to be replaced in an Asylum, a Medical Certificate must be transmitted to the effect either—(1) that the Patient is recovered, or (2) that he is still of unsound mind. In the latter case, the Certificate must further state that Asylum treatment is no longer necessary, and notice must be given to the Board of the manner in which the Patient has been disposed of. The Superintendent of the Asylum from which the Patient has been removed should also, in all cases, be informed as to the Patient's mental condition at the close of the period of Probation.

11. In the case of a Pauper Lunatic who, after the expiry of the period of Probation, remains insane, and in receipt of Parochial Relief, and who is suitable for residence in a Private Dwelling, application must be made to the Board, according to Form D, for their sanction to whatever permanent arrangement may be proposed for the Patient's care. In the case of such Patients, one Medical Certificate only is required to accompany the application. (See Rule 24 of Board's Instructions.)

Probation
8889 Board Orders Rules
to January to 30 April 1909

GH1/5/1/1/55/4

Charles Edward Craig Ward
no. 8983
ad. 16 December 1902

No. 6143.

SANCTION BY THE GENERAL BOARD OF LUNACY FOR LIBERATION OF A PATIENT ON TRIAL.

An Application having been made to the General Board of Commissioners in Lunacy, and having been duly considered, for the liberation on trial of Charles Edward Craig Ward a Patient in Crichton Royal Asylum, Dumfries together with the accompanying Statement and Medical Certificate, I hereby, by Authority of the Board, sanction the liberation of the said Patient until 22nd July 1909.

John Macpherson
Commissioner in Lunacy.

Dated at Edinburgh, this twenty-second day of January One Thousand Nine Hundred and nine.

Notices to be sent by Superintendents in connection with Probationary Sanctions :—

(1.) *Notice of Patient leaving Asylum.*

(2.) *Notice of Patient returning to Asylum, if replaced.*

(3.) *Notice of any Sanction not acted on.*

See Rules on other side.

M & G Ltd—1000—11-06

Probation
Board Orders. Rules
8889 Board Orders. Rules
30 January to 30 April 1909.

RULES FOR THE REMOVAL ON PROBATION OF PATIENTS IN ASYLUMS.

The object of these Rules is to furnish Inspectors of Poor and others with the information necessary to enable them to apply for the removal of Patients from Asylums on trial; to point out the steps which the General Board of Lunacy require shall be taken for their proper care during the period of trial; and to indicate the course to be adopted on the expiry of the period.

1. Application for the sanction of the Board for the Removal of Patients, whether Private or Pauper, on Probation shall be made according to Form G.

2. No Patient sent to an Asylum at the instance of the Procurator-Fiscal shall be liberated on Probation without his concurrence.

3. Pauper Lunatics removed on Probation shall be visited, once in every three months, by a medical man appointed by the Parish Council, who shall record his visits in the Visiting Book for Pauper Patients in Private Dwellings, which may be procured from Messrs. CONSTABLE, 11 Thistle Street, Edinburgh. It is very desirable that the first visit should be made within three weeks after the removal of the Patient from he Asylum.

4. During the period of Probation, Pauper Lunatics remain subject to visitation by the Commissioners, and all the Board's instructions in regard to them shall be carried out as in the case of Patients placed permanently with their sanction in Private Dwellings.

5. A Patient on Probation cannot, during the currency of the probationary period, be removed from the Poor Roll, nor can any of the conditions on which sanction was granted be altered, without the sanction of the Board.

6. On the order of the Board, or on an entry being made by the Parochial Medical Officer that a Pauper Patient has ceased to be suitable for remaining out on Probation, the Inspector shall, within fourteen days thereafter, remove him back to the Asylum, and send notice to the Board that this has been done.

7. When for any reason it is deemed necessary to send a Patient on Probation back to the Asylum, the Superintendent is bound to receive him on the simple demand for admission, provided the period of Probation is still current.

8. When a Patient on Probation, whether Private or Pauper, is certified recovered during the currency of the probationary period, a notice similar to what is required in the case of Lunatics in Private Dwellings under the Board's permanent sanction should at once be sent to the Board, and also to the Medical Superintendent of the Asylum from which the Patient was liberated.

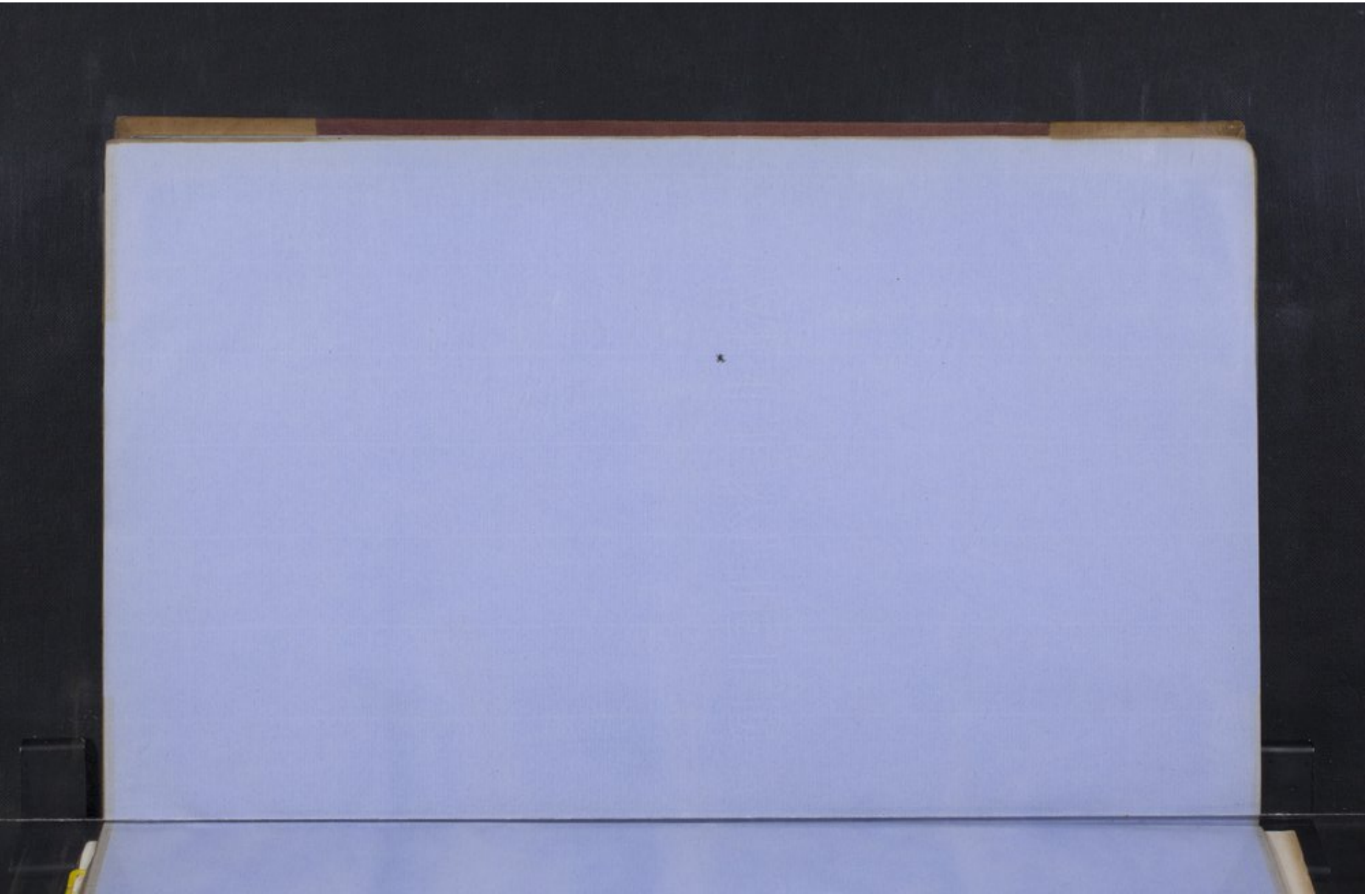
9. In the event of the death of a Patient taking place during the currency of the probationary period, intimation should be at once sent to the Medical Superintendent, with a Medical Certificate as to the cause of death.

10. Before the period of Probation expires, in the case both of Private and Pauper Patients, if notice is not given to the Board that the Patient is to be replaced in an Asylum, a Medical Certificate must be transmitted to the effect either—(1) that the Patient is recovered, or (2) that he is still of unsound mind. In the latter case, the Certificate must further state that Asylum treatment is no longer necessary, and notice must be given to the Board of the manner in which the Patient has been disposed of. The Superintendent of the Asylum from which the Patient has been removed should also, in all cases, be informed as to the Patient's mental condition at the close of the period of Probation.

11. In the case of a Pauper Lunatic who, after the expiry of the period of Probation, remains insane, and in receipt of Parochial Relief, and who is suitable for residence in a Private Dwelling, application must be made to the Board, according to Form D, for their sanction to whatever permanent arrangement may be proposed for the Patient's care. In the case of such Patients, one Medical Certificate only is required to accompany the application. (See Rule 24 of Board's Instructions.)

DGH1/5/1/1/55

Violation
Charles Ed. Craig Ward.
28th January & 22nd July 1909.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ——— of the (2) County of Renfrew
of Lanark ——— and his Substitutes,

The Petition of Alex. Heggie, Inspector of Poor,
Govan Parish Council, Govan Road Dennistoun.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Susan Duncan McLauchlin, 51 High Street, Dennistoun,
your Petitioner's (3) Pauper Lunatic, ———

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Susan Duncan McLauchlin, ——— to the Southern Counties Asylum, Bothwell and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Alex Heggie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirty first (4) day of December, ——— One thousand eight hundred and one hundred and one years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Susan Duncan McLauchlin.
2. Sex and Age,	Female, Aged 25 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	51 High Street, Dennistoun.
7. Place where Found and Examined,	51 High Street, Dennistoun.
8. Length of time Insane,	About 2 months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	About 2 months.
13. Supposed Cause,	Childbirth.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Govan Parish Council.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Husb. John McLauchlin 11 Newark Avenue, Dennistoun Glasgow. None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has been previously in an Establishment, state when, and date of latest admission or application thereto. If never previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirty first day of December, One thousand nine hundred and one years.

(*To be signed by the party applying*) Alex Heggie

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Alexander Anderson, ——
being a (1) Doctor of Medicine of Glasgow University,
and being in actual practice as a (2) Physician, ——
do hereby certify, on soul and conscience, that I have this day, at (3) 51 High Street Stornaer, —— in the County of Wigtown, —— separately from any other Medical Practitioner, visited and personally examined (4) Susan Duncan McLauchlin, a married woman and pauper lunatic, —— and that the said Susan Duncan McLauchlin is a (5) person of unsound mind, —— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) (1) Silly behaviour (2) Indecent language (cursing, filthy talk) (3) Gives irrelevant answers to questions.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her husband, John McLauchlin states that she became very low spirited a fortnight after her child was born (Date of birth 6th/12th) and attempted to destroy herself by rushing out to the railway and the same day got her name changed from the Melancholia to the ordinary.

Name and Medical Designation, J. A. Anderson M.D.

Place of Abode, 21 Lewis St. Stranraer

DATED this thirty first day of December, One thousand ~~eight~~ nine hundred and one Years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Dale,
being a (1) Licentiate of the Royal College of Physicians & Surgeons Edinburgh & the Faculty of Physicians Glasgow
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 51 High St Stranaer, —— in the County of Wigtown —— separately from any other Medical Practitioner, visited and personally examined (4) Susan Duncan McLauchlin a married woman & pauper lunatic and that the said Susan Duncan McLauchlin is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) (1) Melancholia refused to speak for days. 2 Non Boisterous in her conduct talking & crying, (3) Has the delusion that her child will be stolen & cannot carry on a sensible conversation.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others; (7)
Her husband John McLauchlin informed me that she imagines she is a lost soul that her husband was Jesus Christ. He also said she left the house in her night dress & walked on to the railway to commit suicide.

Name and Medical Designation, John Dale L.R.C.P. L.R.C.S. L.P.

Place of Abode, 5 Castle St Stranaer

DATED this thirty first day of December, One thousand ~~eight~~ nine hundred and One.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Alexander Anderson
being (1) a Doctor of Medicine of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) 57 High Street, Dumfries,
in the County of Dumfries, seen and personally examined
Susan Duncan McLauchlin, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries (Southern Counties Asylum).

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualifications.
(2) State place of examination.
(3) State place at which Asylum is situated.

J Alexander MD

DATED this thirty first day of December, One thousand ~~eight~~ nine hundred and one years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Susan Duncan McLauchlin to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Alex Meikle Esq Inspector of Poor.

Signature and Address 6 Queensberry Street Stranraer

Date 31st December 1900

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Esquire (4) Honorary Sheriff-Substitute of the (5) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (6) Alexander Meikle, Inspector of Poor, Stewart Stranraer, Certificates under the hands of John Alexander Anderson and John Dale being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (7) Susan Duncan McLauchlin, 57 Highstreet Stranraer (a pauper) and that the said Susan Duncan McLauchlin is a (8) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Susan Duncan McLauchlin as a Patient into the (9) Public Asylum of Southern Counties at Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Susan Duncan McLauchlin, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation
(7) Describe him, &c.: If a Pauper, state so.
(8) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(9) Public, District, Parochial, or Private.

DATED [at Dumfries] this third day of January One thousand ~~eight hundred and~~ nine hundred and two years. Five words deleted.

To the Superintendent of the (9) Public Asylum of Crichton Royal Institution Dumfries.

(9) Public, District, Parochial, or Private.

[Signature] Jno Clerk

No. 8818

Susan Duncan McLauchlan
(Leswalt)

Adm: 1 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~of the (2) County~~ of Dumfries and his Substitutes, at Dumfries:

The Petition of Robert Shields, Inspector of Poor, Parish of Dunscore;

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie Smith, Enoch, Dunscore, Pauper, your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jessie Smith, — to the Crichton Royal Asylum, — and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Robert Shields

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Third (4) day of January, One thousand Nine eight hundred and ~~sixty~~ two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jessie Smith.
2. Sex and Age,	Female. age 27.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Keeps house to her father.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Enoch. Dunscore.
7. Place where Found and Examined,	Enoch. Dunscore.
8. Length of time Insane,	Years.
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	—
12. Duration of Existing Attack,	Years.
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dunscore Parish.
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Smith Father, Enoch, Dunscore, Thornhill.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Third day of January One thousand Nine eight hundred and two.

(To be signed by the Party applying) Robert Shields

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Dunlop, ——— being a (1) Bachelor of Medicine & Master in Surgery (Edinburgh 1882), ——— and being in actual practice as a (2) Physician & Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) Enoch, Burnside, ——— in the County of Dumfries ——— separately from any other Medical Practitioner, visited and personally examined (4) Jessie Smith, Pauper, ——— and that the said Jessie Smith ——— is a (5) person of unsound mind ——— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1 Facts indicating Insanity observed by myself: (6)
Irritability of temper. refuses to answer questions or gives incorrect answers. mutters unintelligible to herself.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Kirkpatrick Enoch informs me that she will not speak to any neighbour except to insult them using bad language; and lives on tea which she takes almost every hour.

Name and Medical Designation, Thomas Dunlop M.B. C.

Place of Abode, Thornhill. Dumfriesshire

DATED this Second day of January, One thousand eight hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Mungo Bryson, ——— being a (1) Bachelor of Medicine and Master in Surgery of Glasgow University ——— and being in actual practice as a (2) Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) Enoch, Burnside, ——— in the County of Dumfries ——— separately from any other Medical Practitioner, visited and personally examined (4) Jessie Smith, Pauper, Enoch, Burnside, ——— and that the said Jessie Smith, ——— is a (5) person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She sits with face turned to wall & for a time Satisfactorily refuses to speak, & proved to speak becomes violent & asserts that all around her are "devils" & touches she becomes violent.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Maggie Smith Clay Hole Ecclefechan (her sister in law) states that Jessie Smith has repeatedly threatened to murder one another of the family — that she has delusion that they body is persecuting her — some times says all day Jessie Kirkpatrick (next door) states that Jessie Smith has threatened to kill her & that she is afraid to

Name and Medical Designation, Mungo Bryson M.B.C.M.

Place of Abode Thornhill

DATED this Second day of January, One thousand eight hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas Dunlop
being (1) Bachelor of Medicine & Master in Surgery,
hereby certify, on soul and conscience, that I have this day, at (2) 9 Enoch Place,
in the County of Dumfries, seen and personally examined
Jessie Smith, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries

Thomas Dunlop MB CM

(1) State medical qualification.
(2) State place of examination.

DATED this Second day of January, One thousand eight nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein Jessie Smith,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Robt Shields, Parish of Dunscore

Date 3rd January, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary Sheriff Substitute
of ~~the~~ (1) Dumfries & Galloway at Dumfries,
having had produced to me, with a Petition at the instance of (2) Robert
Shiells Inspector of Poor, Durisdeer,
Certificates under the hands of Thomas Dunlop,
and Mungo Bryson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3)
Jessie Smith, Enoch Durisdeer (a pauper), and that the said
Jessie Smith, is a (4) person of unsound
mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jessie Smith, as a Patient into the
(5) Public Asylum of Crichton Royal Institution, and I authorize
her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jessie Smith,
which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED this Fourth day of January, One thousand ~~eight hundred and~~ nine hundred and two years. Three printed words deleted. J. C.
J. C. Clerk

To the Superintendent of the (1) Public
Asylum of Crichton Royal Institution
Dumfries

(1) Public, District, Parochial, or Private.

No. 8819.
Jessie Smith.
(Burnsdeer)
Adm. 3rd January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,*— at Dumfries:

The Petition of John Newall, 35 Brooke St. Dumfries;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Newall or Goplen, — your Petitioner's (3) Daughter, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Newall or Goplen, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John Newall

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Sixth (4) day of January, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Janet Newall or Goplen.
2. Sex and Age,	Female, - 25 years. -
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Millines.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Wigan.
7. Place where Found and Examined,	~~Wigan~~. Dumfries.
8. Length of time Insane,	11 weeks.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	25 years.
11. When and where previously under Examination and Treatment (5)	23rd Sept. 1901. Haydock Lodge Newton le Willows.
12. Duration of Existing Attack,	Two days. -
13. Supposed Cause,	Physical Weakness. -
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Newall 35 Brooke St: Dumfries; - Father; - No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state the date of latest admission or approximate thereto. If not previously under Examination or Treatment, state that fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fifth day of January, — One thousand nine hundred and Four years.

(To be signed by the party applying) John Newall

T. & A. C.—April 1901. P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George Robert Simpkin
being a (1) Bachelor of Medicine and Master in Surgery of Edinburgh University,
and being in actual practice as a (2) Physician & Surgeon.
do hereby certify, on soul and conscience, that I have this day, at (3) 35 Brooke Street Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Janet Newall a Joplen 35 Brooke Street Dumfries and that the said Janet Newall a Joplen is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance and manner (She sits writing illegible letters) refusing to answer questions &c Her Rambling Conversation.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr John Newall (her father) tells me that She has become quite unmanageable.

Name and Medical Designation, Geo R. Simpkin

Place of Abode, 35 George Street Dumfries

DATED this fifth day of January, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Peter Murray Kerr
being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Janet Newall a Joplen, 35 Brooke Street, Dumfries and that the said Janet Newall a Joplen is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance and manner she is unable to answer any reasonable question. Is in a state of cataleptic stupor.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M.B.C.M.

Place of Abode, 20 Castle Street, Dumfries

DATED this sixth day of January, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, George Robert Livingston
being (1) Bachelor of Medicine & Master in Surgery
hereby certify, on soul and conscience, that I have this day, at (2) 35 Brooke Street Dumfries,
in the County of Dumfries, seen and personally examined Janet Newall or Gopleu, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
Janet Newall or Gopleu,
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

George R Livingston

DATED this fifth day of January, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Janet Newall or Gopleu — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address John Newall

Date 5th January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff-Substitute, of the (1) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) John Newall, 35 Brooke Street, Dumfries, Certificates under the hands of George Robert Livingston and Peter Murray Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Janet Newall or Gopleu, 35 Brooke Street Dumfries (Pauper) and that the said Janet Newall or Gopleu, is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Newall or Gopleu as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Newall or Gopleu, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Seventh day of January, One thousand nine hundred and two years.

To the Superintendent of the (1) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(1) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8820.

Janet Nevoall or Goplen

Adm: 5 January 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,* — at Dumfries.

The Petition of George Maynard Martin of 1 Merridale Lane, Wolverhampton, Solicitor; —

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Eric Upcott Martin, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Eric Upcott Martin — to the Crichton Royal Institution, — and to sanction his admission into the said Asylum.

(To be signed by the Party applying) G. Maynard Martin

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eighth (4) day of January, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Eric Upcott Martin.
2. Sex and Age,	Male. 24 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Student, Undergraduate.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Stretton House, Church Stretton.
7. Place where Found and Examined,	Dumfries.
8. Length of time Insane,	Three years.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	21 years.
11. When and where previously under Examination and Treatment (5)	Bethlem, London: and Church Stretton.
12. Duration of Existing Attack,	3 years.
13. Supposed Cause,	Overstudy.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No. Violent at first.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	George Maynard Martin, 1 Merridale Lane, Wolverhampton. Father. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Establishment, state date and date of latest admission or appeal-ment thereto. If previously under examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventh day of January, — One thousand nine hundred and two Years.

(To be signed by the party applying) G. Maynard Martin

P. p.

T. & A. C.—Feby. 1901.

No. 2880

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Peter Murray Kerr
being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Railway Station, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Eric Upcott Martin, Student, Shelton House, Church Shelton, and that the said Eric Upcott Martin is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane appearance and manner when spoken to he smiles in a silly fo he is unable to engage in conversation so constantly fondling down on his knees and kissing the handle of his umbrella

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M.B.

Place of Abode, 27 Castle Blnd Dumfries

DATED this seventh day of January, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Eric Upcott Martin, Student, Shelton House, Church Shelton, Shropshire, and that the said Eric Upcott Martin is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) His weak minded appearance - smiles and stares around in an aimless manner, or shuts his eyes and stoops forward melts his face on his knees: does not enter into conversation. -

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 27 Castle Street, Dumfries

DATED this Eighth day of January, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Murray Kerr
being (1) Graduate of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) Railway Station, Dumfries,
in the County of Dumfries, seen and personally examined
Eric Upcott Martin, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Peter Murray Kerr

Dated this seventh day of January, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Eric Upcott Martin to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address J. Maynard Martin.
1 Merridale Lane,
Wolverhampton.

Date 9 Jan: 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff-Substitute,
of ~~the~~ (4) Dumfries & Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (5) George Maynard Martin, 1 Merridale Lane, Wolverhampton
Certificates under the hands of Peter Murray Kerr,
and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Eric Upcott Martin, Stretton House, Chapel Stretton, Shropshire (Private Con.) and that the said Eric Upcott Martin, is a (7) person of unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Eric Upcott Martin as a patient into the (8) Public Asylum of Crichton Royal Institution, and I authorize ~~his~~ Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Eric Upcott Martin, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(6) Date etc. Min. and if a Pauper, state so.
(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(8) Public, District, Parochial, or Private.

Dated [at Dumfries,] this Eighth day of January, One thousand nine hundred and two years.

To the Superintendent of the (8) Public
Asylum of Crichton Royal Institution at Dumfries
one word deleted –

[Signature] Geo. Campion

(8) Public, District, Parochial, or Private.

No. 8821.

Eric Upcott Sharkin.

Adm. 4 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Wigtown *and his Substitutes,—*

The Petition of William Miller. Inspector of Poor for the Parish of Inch

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Murphy your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Murphy to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Wm Miller

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this tenth (4) day of January One thousand nine hundred and two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Murphy
2. Sex and Age,	female, 60
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Outworker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dalrymple Street, Stranraer
7. Place where Found and Examined,	do do
8. Length of time Insane,	About two days
9. Whether First Attack,	Yes so far as known
10. Age (if known) on First Attack,	✓
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	
12. Duration of Existing Attack,	Not known
13. Supposed Cause,	Concern about her son lately enlisted
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Inch
18. Date of becoming Chargeable,	10th January 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Murphy, Mariner Glen Street, Stranraer Son
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this tenth day of January One thousand nine hundred and two year

(To be signed by the party applying) Wm Miller

T & A. C.—Dec. 1893. P. p.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Andrew Clue Jr
being a (1) Bachelor of Medicine & of Glasgow Univers
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Rankin's Cl
Dalrymple St Stranraer in the County of
Wigtown
separately from any other Medical Practitioner,
visited and personally examined (4) Elizabeth Murphy
and that
the said Elizabeth Murphy is a (5) person
of unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
1 The facial aspect of acute mania
2 She has the delusion that her food is poi
& refuses to taste it on that account
3 She has the hallucination that she & the see
men in the bed with her & screaming & to assau

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her daughter Mrs Boyd, a neighbour, ex
me that is continually complaining of her
being poisoned, that she wants to knife
defend herself against two men & he was
threatening to tear me

Name and Medical Designation, Andrew Clue Jr
M. B. & C.
Place of Abode George St Stranraer

Dated this 10th day of January One thousand ~~eight~~ nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Alexander Anderson
being a (1) Doctor of Medicine of Glasgow University
and being in actual practice as a (2) physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Rankins Close
Dalrymple Street, Stranraer in the County of
Wigtown
separately from any other Medical Practitioner,
visited and personally examined (4) Elizabeth Murphy, Outdoor P
and that
the said Elizabeth Murphy is a (5) person of unsou
mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
1. Vacant gaze. 2. Excited behaviour. 3. Loud talking to
invisible persons and screaming. 4. Incoherent speech. 5. Refus
to take food for fear of being poisoned 6. The presence of delusions
that she is surrounded by men dressed in red seeking to harm her and the
the "red Room" in bed 7. Inability to remember for our name.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Son and daughter (Mrs Hamilton) inform me that she
extremely excited after the heard of her son's enlistment last Monda
and that she has not eaten any food since then and that she
shouting out and screaming

Name and Medical Designation, J A Anderson M.D.
Place of Abode 21 Lewis Street Stranraer

Dated this tenth day of January One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the

Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ____

Signature and Address ____

Date ____

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Cameron Esqr Advocate (1) Sheriff Substitute of the (2) Sheriff-dom of Dumfries and Galloway, having had produced to me, with a Petition at the instance of (3) William Miller Inspector of Poor for the Parish of Dalbeattie Certificates under the hands of Andrew Cheddle M.B.C.M. and John Alexander Anderson M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Murphy - pauper - and that the said Elizabeth Murphy is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Murphy as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Murphy which accompanied the said Petition.

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED this tenth day of January One thousand ~~eight~~ nine hundred and two

Jn Cameron

To the Superintendent of the (7)
Southern Counties *Asylum of* Dumfries

(7) Public, District, Parochial, or Private.

No. 8822.

Elizabeth Murphy.

(Inch)

Adm: 10 January 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of the (2) Dumfries and Galloway, — and his Substitutes, — at Dumfries:

The Petition of John Maxwell, Inspector of Poor of the Parish of Dragonner: —

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Christina Johnstone, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Christina Johnstone, — to the Southern Counties Asylum, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) John Maxwell.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirteenth (4) day of January, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Christina Johnstone.
2. Sex and Age,	Female. 46 past in July.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Working Class. (Cook.)
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Lady field. Dumfries.
7. Place where Found and Examined,	32 King Street. Maxwelltown
8. Length of time Insane,	a few days. since Tuesday.
9. Whether First Attack,	Second to the L.
10. Age (if known) on First Attack,	about 26 years.
11. When and where previously under Examination and Treatment (5)	D. Co. Asylum. from Lin 21st Oct. 1884.
12. Duration of Existing Attack,	Since Tuesday last.
13. Supposed Cause,	None known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Gets outrageous, but does not threaten any.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dragonner Parish Govr. supposed to be Johnstone Settlement.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs. Elizabeth Miller resides at 32 King St. Maxwelltown. says none of the family were ever insane before.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under observation or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth day of January, — One thousand nine hundred and two years.

(To be signed by the party applying) John Maxwell

T. & A. C.—Jan. 1900. P p

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 32 King St. Maxwelltown Dumfries
Kirkcudbright, separately from any other Medical Practitioner, in the County of
visited and personally examined (4) Christina Johnstone Pauper Maxwelltown Pauper, and that
the said Christina Johnstone is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is excited
says she is persecuted, that Auld
being played on her.

2 Other facts (if any) indicating Insanity communicated to me by others: (7)
Bertram tells me that she comes
wanders, as she is violent at times
upsets at night.

Name and Medical Designation, P. Murray M.D.

Place of Abode, Castle St Dumfries

DATED this 13th day of January One thousand
nine hundred 12 years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Dewar Robson
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 32 Kingst.
Maxwelltown, Dumfries
Kirkcudbright, separately from any other Medical Practitioner, in the County of
visited and personally examined (4) Christina Johnstone, Pauper
32 Kingst. Maxwelltown and that
the said Christina Johnstone, pauper, is a (5) person of
unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) **
she is incoherent in her conversation - at times
violent. Hears voices, and imagines that she is
going to be the mother of twins - also a genius - by
divine conceptions. Sleeps but few hours
at night.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
she has been violent to violent
if reprimanded, and has delusions.

Name and Medical Designation, John Dewar Robson M.B.C.M.

Place of Abode 7 Terregles St Maxwelltown

DATED this 13th day of January, One thousand
nine hundred and twelve years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Dewar Robson
being (1) a graduate of Edinburgh University (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) 32 Kings St, Maxwelltown (2) State place of examination.
in the County of Kirkcudbright, seen and personally examined Christina Johnstone, pauper, —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries (3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

John Dewar Robson

DATED this 13th day of January, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Christina Johnstone to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor.

Signature and Address John Maxwell. 23 Kings St Maxwelltown

Date 13th. January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (4) Sheriff-Substitute of the (5) Dumfries & Galloway at Dumfries having had produced to me, with a Petition at the instance of (6) John Maxwell, Inspector of Poor, Troqueer, Certificates under the hands of Patrick Murray and John Dewar Robson — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (7) Christina Johnstone, 32 King Street, Maxwelltown, and that the said Christina Johnstone is a (8) person of unsound mind — and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Christina Johnstone, — as a patient into the (9) Public — Asylum of Southern Counties and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Christina Johnstone, — which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(7) Describe him, and if a Pauper, state so.
(8) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(9) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourteenth day of January One thousand nine hundred and two years.

To the Superintendent of the (9) Public *Asylum of* Southern Counties at Dumfries. Two words deleted.

(9) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8823.

Christina Johnstone

(Iroquois)

Adm: 13 January 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of Dumfries ~~and~~ Galloway — *and his Substitutes,* — at Dumfries.

The Petition of John Lamb. Inspector of Poor for the Parish of Annan.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Ann Menzies. 30 Thomas Street Annan your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Ann Menzies to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John Lamb Inspector of Poor

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirteenth (3) day of January — One thousand eight hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mrs Ann Menzies
2. Sex and Age,	Female. Age 68 years.
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	-
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	30 Thomas Street. Annan.
7. Place where Found and Examined,	30 Thomas Street. Annan.
8. Length of time Insane,	about 3 week.
9. Whether First Attack,	No
10. Age (if known) on First Attack,	not known meantime.
11. When and where previously under Examination and Treatment (5)	Dr. Mc
12. Duration of Existing Attack,	about 3 weeks.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	George Whyte. Burnes Schoolhouse, Laird. Sutherlandshire. Son in-law.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not known.

(5) If patient has previously in an asylum, state name of latest asylum or hospital. If previously under treatment or treatment out of asylum or hospital.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth day of January — One thousand nine hundred and two.

(To be signed by the party applying) John Lamb

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Lindsay Howie
being a (1) Bachelor of Medicine & Master in Surgery of Glasgow University
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 30 Thomas St. Annan
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Ann Menzies, 30 Thomas St. Annan, a pauper.
and that the said Ann Menzies is a (5) person of unsound mind.
and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) For several week past she has entirely altred in her disposition from a bright intelligent person, to a melancholic individual with whom it is impossible to carry on a conversation. She sits in bed, with vacant stare on her face & cannot be roused to interest herself in anything

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Oliver, who attends upon her, corroborates above statement, & says that of late she has evidently been lost to her surroundings, does things in an automatic way & can give no intelligible explanation of her conduct.

Name and Medical Designation, J. L. Howie MB & C.

Place of Abode, Annan House, Annan

DATED this eleventh day of January One thousand ~~eight~~ hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Daniel Mackenzie
being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University
and being in actual practice as a (2) General Medical Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) 30 Thomas St. Annan
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Ann Menzies, pauper. 30 Thomas St. Annan.
and that the said Ann Menzies is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great Mental imbecility – loss of memory – want of concentration of thought on ordinary topics, – inability to look after herself or household. – Seemingly no physical defect or infirmity. —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Melancholy & reserved, great weakness of will & unwilling or unable to communicate her wants. –

Name and Medical Designation, D. Mackenzie MB. CM.

Place of Abode 19 Lott St. – Annan

DATED this Eleventh day of January One thousand ~~eight~~ nine hundred and two years. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Lindsay Howie being (1) an M.B. & C.M. of Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Annan in the County of Dumfries, seen and personally examined Ann Menzies, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

J. L. Howie MB&CM

DATED this thirteenth day of January One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Mrs Ann Menzies to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address John Laurie Annan

Date 13th January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff Substitute of ~~the~~ (1) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) John Laurie Inspector of Poor, Annan, Certificates under the hands of John Lindsay Howie and Daniel MacKenzie being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Mrs Ann Menzies, 30 Thomas Street, Annan, a pauper, and that the said Ann Menzies is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Menzies as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Menzies which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourteenth day of January One thousand ~~eight hundred and~~ nine hundred and two years.

To the Superintendent of the (5) Public Asylum of Crichton Royal Institution, at ~~Dumfries~~.

(5) Public, District, Parochial, or Private.

Four words deleted.

[Signature] Geo. Campion

No. 8824.

Ann Mackenzie

(Annan)

Adm: 13 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Sheriffdom of Dumfries & Galloway *and his Substitutes,—*

The Petition of Mary Campbell residing at Knockmore in the parish of Urr town and County of Urr humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Campbell, farmer, Knockmore your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Campbell to the Crichton Royal Asylum, Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Mary Campbell

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fifteenth (4) day of January One thousand nine ~~eight~~ hundred and two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	George Campbell
2. Sex and Age,	Male, 54
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Protestant, United Free.
6. Previous Place of Abode,	Knockmore in parish of Urr town
7. Place where Found and Examined,	at Knockmore
8. Length of time Insane,	About 3 mos but worked till a week ago
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	54
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	—
12. Duration of Existing Attack,	about 3 mos.
13. Supposed Cause,	anxiety —
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wife Mrs Geo Campbell his wife residing at Knockmore No member of family ever known to have been insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fifteenth day of January One thousand nine ~~eight~~ hundred and two years

(To be signed by the party applying) Mary Campbell

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Charles MacFlecknoe
being a (1) Doctor of Medicine of the University of
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Knockmore Johnstonmire, Wigtown in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) George Campbell, Farmer, Knockmore, Johnstonmire, Wigtown and that the said George Campbell is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
Is incoherent, Agitated and depressed
Restless in manner and expresses himself
as being unable to control himself

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife Mary Campbell says that
her husband sleeps none and screams
frequently - He is so agitated that he
stands on his table

Name and Medical Designation, Charles MacFlecknoe

Place of Abode, Wigtown

DATED this 11th day of January One thousand eight hundred and two years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Fleming Smith
being a (1) Bachelor of Medicine & Masters of Surgery
of Edinburgh University
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Knockmore Johannemire Wigtown in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) George Campbell Farmer Knockmore Johannemire Wigtown and that the said George Campbell is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He says he is very depressed, at times in despair & times in constant dread of losing his reason & of bringing ruin on his family

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His wife Mary Campbell informs me that he refuses to stay in the house or go to bed unless there is a man in the house, that he is constantly crying out that he is going mad

Name and Medical Designation, James F. Smith M.B. C.M.

Place of Abode Wigtown

DATED this 15th day of January One thousand eight hundred and two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, _____

Signature and Address _____

Date _____

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Mackie (1) Sheriff Substitute
of the (2) Sheriffdom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) Mary Campbell
residing at Knockmore in the Parish of Kirkpatrick Fleming in the County of Dumfries
Certificates under the hands of Charles M'Bride Doctor of Medicine Kirkpatrick
and James Fleming Smith M.B.C.M. Whithorn, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
George Campbell, farmer, Knockmore Kirkpatrick Fleming and that the said
George Campbell is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Campbell as a Patient into the (6) Crichton Royal Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Campbell which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED this fifteenth day of January One thousand ~~eight~~ nine hundred and ~~forty~~ years

Wm Mackie

To the Superintendent of the (7) Crichton Royal *Asylum of* Dumfries.

(7) Public, District, Parochial, or Private.

No. 8825.

George Campbell

Adm: 16 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (1) Shire~~ *of* Dumfries + Galloway, *and his Substitutes,*— at Dumfries:

The Petition of Thomas Cauk, The Pheasantries, Ulnes, Walton, Lancashire.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Cauk, The Pheasantries, Ulnes. Walton. — your Petitioner's (2) wife, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Cauk — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Thomas Cauk

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eighteenth (3) day of January, — One thousand nine hundred and two years.-

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Cauk.
2. Sex and Age,	Female, 45 years.-
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	New Zealand, near Grimsby.
7. Place where Found and Examined,	The Pheasantries, Ulnes-Walton, Lancs.
8. Length of time Insane,	21 days.
9. Whether First Attack,	1st attack.
10. Age (if known) on First Attack,	45 years.
11. When and where previously under Examination and Treatment (5)	Not previously.
12. Duration of Existing Attack,	21 days.
13. Supposed Cause,	Over anxiety about the care of an adopted child.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~St. James' Parish, Leyland~~
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Cauk, The Pheasantries, Ulnes. Walton, Lancs.- Husband: No member of family known to be or to have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If Patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correct and correctly stated.

DATED this Seventeenth day of January, — One thousand nine hundred and two years.

(To be signed by the party applying) Thomas Cauk P. P.

C. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Peter Fraser,
being a (1) Doctor of Medicine,
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) The Pheasantries, Ulnes Walton, near Preston,
in the County of Lancaster,
separately from any other Medical Practitioner visited and personally examined (4) Mary Cank, The Pheasantries, Ulnes-Walton, near Preston, Lancashire, — and that the said Mary Cank, is a (5) person of unsound mind,
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Mary Cank is entirely changed from her ordinary manner: she stares vacantly at me in some occasions, she is rough & almost unmanageable: she has ceased taking notice of her children: she conceives, as she apparently imagines, with a step-daughter,

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Margaret Ellen Calderwood states that Mary Cank rambles & talks incoherently about some Estate does not exist: & that she seems to feel herself some danger which she cannot escape from

Name and Medical Designation, Peter Fraser, Doctor of M.

Place of Abode, Lylund Lancs.

DATED this 16th day of Jan.— One thousand nine hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Alexander Thomson,
being a (1) Doctor of medicine of Surgeon University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution,
in the County of Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Mary Cank, Housewife, The Pheasantries, Ulnes Walton near Preston Lancashire, and that the said Mary Cank,
is a (5) person of unsound mind,
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Cannot engage in Conversation; talks quite incoherently in a muttering unintelligent manner.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 27 Castle Street Dumfries

DATED this Eighteenth day of January — One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Fraser, being (1) a Doctor of Medicine, Ulm, Walton (1) State medical qualification. hereby certify, on soul and conscience, that I have this day, at (2) The Pheasantries, (2) State place of examination. in the County of Lanarkshire, ———, seen and personally examined Mary Cank, ———, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Peter Fraser M.D

DATED this 16th day of Jan.— One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Dumfries, Asylum to receive therein Mary Cank, ——— to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Husband

Signature and Address Hazel Cank

Date 14th January, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson, (1) Sheriff-Substitute of the Lothians and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Thomas Cank, The Pheasantries, Ulnes Walton, Lanarkshire, ——— Certificates under the hands of Peter Fraser, ——— and Alexander Thomson, ———, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Mary Cank, The Pheasantries Ulnes, Walton, Lanarkshire (Her Wife), and that the said Mrs Mary Cank, — is a (5) person of unsound mind, ——— and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Mary Cank ——— as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Mary Cank, ——— which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twentieth day of January, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo. Lampson

No. 8826

Mary Cook.

Adm: 14 January 1908.

S.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of ~~the (2) Lanarkshire~~ Dumfries and Galloway ~~of Lanark~~ and his Substitutes — at ~~Hamilton~~ Dumfries. The Petition of John Lawson = Brick Manufacturer, residing at 54 Mary St., Motherwell; — Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Lawson, 54 Mary Street, Motherwell, your Petitioner's (3) Daughter, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Annie Lawson, — to the Crichton Asylum, Dumfries, — and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) John Lawson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eighteenth (4) day of January, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Annie Lawson.
2. Sex and Age,	Female- 30 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Assists in Father's home.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	54 Mary St., Motherwell.
7. Place where Found and Examined,	Do Do Do.
8. Length of time Insane,	a few weeks.
9. Whether First Attack,	yes. first attack.
10. Age (if known) on First Attack,	" " "
11. When and where previously under Examination and Treatment (5)	"
12. Duration of Existing Attack,	as stated above.
13. Supposed Cause,	Cannot say.
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	a tendency that way.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Private Patient.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mr John Lawson, 54 Mary St. Motherwell. (Father) no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

(5) If patient has previously in an Asylum, state name and date of latest admission or approximate thereto. If previously under Examination or Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eighteenth day of January — One thousand nine hundred and two

(*To be signed by the party applying*) John Lawson

T. & A. C.—Jan. 1900. Pp

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Fotheringham,
being a (1) Bachelor of Medicine & Master in Surg (Glasgow University),
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 54 Merry
Rothwell, Lanark, separately from any other Medical Practitioner,
visited and personally examined (4) Annie Lawson, Spinster,
residing with her father at 54 Merry Rothwell, and that
the said Annie Lawson is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She has been under
my observation for about three weeks. She has occasionally
appeared bright, but generally she refused to speak
questions, refused to take any nourishment (liquid or other
and today, while I was talking to her sister downstairs she attempted
suicide by jumping from the attic window. Her feet were

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
caught in time
from window ledge. After father testifies to the general behaviour of
above and hereafter Dr Gibson testifies both
and the attempt at suicide

Name and Medical Designation, Dr Fotheringham M.B., Ch

Place of Abode, Rosehill Motherwell

DATED this Sixteenth day of January One thousand
nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Robert Paton Jack,
being a (1) Graduate in Medicine & Surgery of the University of Edinburgh
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 54 Merry St
Motherwell, Lanark, separately from any other Medical Practitioner,
visited and personally examined (4) Annie Lawson, 54 Merry St
Motherwell, and that
the said Annie Lawson, is a (5) person of
unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She refuses to speak
& take any notice of questions.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Father informs me that during past three weeks
she has been talking about religion thinking she is lost. That she has
refused her food, remains silent for periods, and at the time each
writes. That this morning she attempted suicide by trying to throw
herself from a window.

Name and Medical Designation, Robert P. Jack M.B. Ch. &c.

Place of Abode Motherwell

DATED this Seventeenth day of January One thousand
nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Fotheringham (Glasgow Univ.), being (1) a Bachelor of Medicine Master in Surgery hereby certify, on soul and conscience, that I have this day, at (2) 57 Merry St. Motherwell in the County of Lanark, seen and personally examined Annie Lawson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

John Fotheringham

DATED this sixteenth day of January, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Annie Lawson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address John Lawson 57 Merry Street Motherwell

Date 18th January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lawson (1) Sheriff-Substitute of the Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) John Lawson, Brick Manufacturer 57 Merry St: Motherwell, Certificates under the hands of John Fotheringham, and Robert Paton Jack, being two Medical Persons duly qualified in terms of an Act intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Annie Lawson, 57 Merry Street, Motherwell: Petn Daughter, and that the said Annie Lawson is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Annie Lawson as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Annie Lawson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twentieth day of January, One thousand nine hundred and two years.

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries.

[Signature] Geo. Lawson

(6) Public, District, Parochial, or Private.

No. 8824.

Annie Lawson.

Adm: 18 January 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, *and his Substitutes* — of Dumfries:

The Petition of Agnes Craig or Mc Farlane, 16 Fitchfield Road, Troon;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Spence Lockhart Mc Farlane, ~~Agnes Craig or Mc Farlane Wife~~ Husband, your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Spence Mc Farlane, — to the Crichton Institution — and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Agnes Craig or Mc Farland

DATED this (4) Twenty Ninth day of January, — One thousand nine hundred and two years.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Spence Lockhart Mc Farlane
2. Sex and Age,	Male 33
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Grocer and Spirit Salesman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Sometime in Glasgow in Business as Grocer
7. Place where Found and Examined,	16 Fitchfield Road Troon
8. Length of time Insane,	about a year
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	Nowhere unless at Home
12. Duration of Existing Attack,	—
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Jessie Mc Farlane Mother, Mrs Sinclair Sister, Agnes Craig Wife — all 16 Fitchfield Road Troon
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has been previously in an Asylum, state name and date of latest admission or approximate thereto. If not previously under Examination or Treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty Eighth day of January — One thousand nine hundred and two years.

(To be signed by the party applying) Agnes Craig or Mc Farlane

T & A. C.—April 1900.

P p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Hoff
being a (1) Bachelor of Medicine & Master of Surgery, Glasgow University
and being in actual practice as a (2) physician
do hereby certify, on soul and conscience, that I have this day, at (3) 16 Lotsfield Terrace
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) James Spence Lockhart Macfarlane
and that the said James Spence Lockhart Macfarlane is a (5) person of unsound mind
and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
Excitement on duo unimportant matters; his mind always reverts to them when talking on other
He tells me they have got the blackman now". Means
Says he saw a little Baal about the size of his hand, it w
& danced with fire in the grate over a mistake patter

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Brings home pebbles from the beach & tells her
to take care of them as they are diamonds — Mrs Law
16 Lotsfi
Refused to take food from his wife & upset
the tray done by her as wrong — Mrs May

Name and Medical Designation, John Hoff M.B., C.M.

Place of Abode, Langlands, Troon

DATED this twenty seventh day of January One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) James Spence Lockhart McFarlane Grocer, 16 Lotsfield Road Troon, Ayrshire
and that the said James Spence Lockhart McFarlane is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Talks incoherently about religious matters, about which he is much troubled: has visions in the night: Baal came into his bedroom on one occasion: he also talks about seeing imps dancing around —

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode 27 Carlyle Street, Dumfries

DATED this Twenty ninth day of January One thousand nine hundred and two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Hoff being (1) a Bachelor of Medicine Master Surgery Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) 16 Litchfield Rd in the County of Ayr seen and personally examined James Spence Lockhart Macfarlane, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

John Hoff M.B., C.M.

DATED this twenty seventh day of January One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein James Spence Lockhart Mc Farlane to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Wife

Signature and Address Agnes Craig or Macfarlane

Date 28 January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I George Lampson (1) Sheriff-Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Agnes Craig or Mc Farlane, No 16 Litchfield Road, Troon, Certificates under the hands of John Hogg, M.B. C.M. and Alex. Thomson, M.B. C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) James Spence Lockhart Mc Farlane No 16 Litchfield Road, Troon Retired Husband and that the said James Spence Lockhart Mc Farlane is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Spence Lockhart Mc Farlane as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Spence Lockhart Mc Farlane which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(3) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Thirtieth day of January, One thousand nine hundred and two years.-

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution Dumfries.

[*Signature*] Geo Lampson

(5) Public, District, Parochial, or Private.

No 8828.

James Spence Lockhart Inchtalane.

Aden. 28th January 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,*— at Dumfries:

The Petition of Mrs Sarah Ann McCaw — 22 Lonsdale Street, Belfast, — humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Henry McCaw, — your Petitioner's (3) Son, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Henry McCaw, — to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Sarah Ann McCaw

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Ninth (4) day of January, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Thomas Henry McCaw
2. Sex and Age,	Male 30 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Clerk
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	22 Lonsdale St. Belfast. Ireland.
7. Place where Found and Examined,	Do. and Dumfries.
8. Length of time Insane,	about six months
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	six months
13. Supposed Cause,	Business troubles
14. Whether subject to Epilepsy,	?
15. Whether Suicidal,	No
16. Whether Dangerous to others,	at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Sarah Ann McCaw Mother.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	No

(5) If patient has been previously in an Asylum, state the date of latest admission or approximate thereto. If not previously under examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty Eighth day of January, — One thousand nine hundred and two years.

(To be signed by the party applying) Sarah Ann McCaw

T. & A. C.—April 1900.

P p.

Thomas Henry McCaw Sarah Ann McCaw

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Isaac adamson
being a (1) Graduate of the Royal universities Ireland
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 2½ Lonsdale Belfast in the County of Antrim separately from any other Medical Practitioner, visited and personally examined (4) Thomas Henry McCaw Clerk, 2½ Lonsdale St, Belfast, and that the said Thomas H. McCaw is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
He has several delusions such as that his teeth belong to animals & hallucinations of hearing He has a former medical attendance

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
That at times he is violent & has lost all appetite for his meals at times

Name and Medical Designation, Isaac Adamson M.D.

Place of Abode, 8 Lonsdale Terrace

DATED this 28th day of January One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon.
do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution — in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Thomas Henry McCaw Clerk, 2½ Lonsdale Street, Belfast — and that the said Thomas Henry McCaw — is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Talks in a confused and incoherent manner about his affairs; repeats the same thing over and over again: thinks a change has taken place in his body so that he cannot sleep

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode 27 Castle Street, Dumfries

DATED this Twenty-ninth day of January, — One thousand nine hundred and two years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Isaac A. Davidson M.D. being (1) Graduate Royal University Ireland hereby certify, on soul and conscience, that I have this day, at (2) 27 Lonsdale St. Belfast in the County of Antrim, seen and personally examined Thomas Henry McCaw, Clerk, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Isaac A. Davidson, M.D.

DATED this 28th day of January — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Thomas Henry McCaw — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Wish Wm McCaw

Date 28th January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (1) Sheriff-Substitute of ~~the~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Mrs Sarah Ann McCaw, 27 Lonsdale Street Belfast, Certificates under the hands of Isaac A. Davidson, and Alex. Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Henry McCaw, Clerk, 27 Lonsdale Street Belfast (Mrs McCaw) and that the said Thomas Henry McCaw is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Henry McCaw as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Henry McCaw which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Thirtieth day of January, One thousand nine hundred and two years.

To the Superintendent of the (6) Public, Asylum of Crichton Royal Institution, Dumfries.

[Signature] Geo. Campion

(6) Public, District, Parochial, or Private.

No. 8889.

Thomas Henry McCaw.

Aden. 28 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries & Galloway *and his Substitutes,*—at Dumfries.

The Petition of John Samuel Wilkinson. Glenart. Blackrock. Co. Dublin

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Wilkinson

(*) State degree of relationship or other society in which Petitioner stands to Lunatic.

your Petitioner's (*) Father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Wilkinson to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) John Samuel Wilkinson

(*) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirty-first (*) day of January One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Wilkinson
2. Sex and Age,	male 65 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Merchant
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Glenart Blackrock. C. Dublin. Dublin.
7. Place where Found and Examined,	Dublin.
8. Length of time Insane,	about 12 months.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	64 years.
11. When and where previously under Examination and Treatment (†)	Bloomfield. Southampton Rd. Dublin. for one week previous to today.
12. Duration of Existing Attack,	12 months.
13. Supposed Cause,	old age.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	not so far as known.
16. Whether Dangerous to others,	at times.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known); and whether any Member of Family known to be or to have been Insane,	John Samuel Wilkinson Eldest Son. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirty-first day of January One thousand nine hundred and two years.

(*To be signed by the party applying*) John Samuel Wilkinson

P. p.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Robert Blake K. Vittie
being a (1) M.D. Dub.
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 62 Fitzgerald Square Dublin
visited and personally examined (4) James Wilkinson of Glenart Blackrock Co Dublin
separately from any other Medical Practitioner, and that the said James Wilkinson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) I saw him accusing himself of many things which he never did, frequently crying & moaning and declaring that his life had been a waste he needed pardon

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That he became a little more irregular in his conduct and frequently shouted aloud in the street

Name and Medical Designation, Robt B K. Vittie M.D.

Place of Abode, 62 Fitzgerald Square

DATED this 25th day of January One thousand nine hundred and two

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) State the facts.

(7) State the information, and from whom derived.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Henry Theodore Bewley
being a (1) M.D. Univ. Dubl.
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Bloomfield Donnybrook Dublin
visited and personally examined (4) James Wilkinson of Glenart, Blackrock, Co Dublin
separately from any other Medical Practitioner, and that the said James Wilkinson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is depressed other been for months. He constantly talks about his religious life says it was all a sham. He is unhappy about it. I have seen him weep talking to me. His mind is wholly taken up with his state, bodily & Spiritual. He cannot make up his mind & resolve to do things he used to.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his son John Wilkinson tells me that he often in the evg. at home becomes very excited: shouts: cries: rushes about: stamps: and that this lasts for an hour or more. In these attacks he seems to have no Control of himself.

Name and Medical Designation, H. T. Bewley MD

Place of Abode, 26 Lr Baggot St. Dublin

DATED this 30th day of Dec One thousand nine hundred and two

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street, and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a pauper state so.

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) State the facts.

(7) State the information and from whom derived.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Rutherford
being (1) a Fellow of the Royal College of Physicians
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries
in the County of Dumfries, seen and personally examined
James Wilkinson, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

James Rutherford M.D. F.R.C.P.E.

DATED this thirty first day of January One thousand nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein James Wilkinson
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, eldest son

Signature and Address John Samuel Wilkinson

Date 31st. January 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary Sheriff-Substitute (1) of the County of Dumfries and Galloway, or Steward of Dumfries having had produced to me, with a Petition at the instance of (2) John Samuel Wilkinson, Glenart, Blackrock, Dublin, Certificates under the hands of Robert Blake M'Wittie and Henry Theodore Bewley, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) James Wilkinson, Glenart, Blackrock, Dublin (Patient Father) and that the said James Wilkinson is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Wilkinson as a patient into the (5) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Wilkinson which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this 1st day of February One thousand nine hundred and two years.

To the Superintendent of the (5) Public Asylum of Crichton Royal Institution Dumfries.

(5) Public, District, Parochial, or Private.

[Signature] John Clerk

No. 8830.

James Wilkinson.

Adm. 31 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff - of the (2) ~~County~~ of Dumfries & Galloway *and his Substitutes,*— at Dumfries:

The Petition of John Wilson, Curraghmore, Prestwick, Ayr:—

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Violet Arras Wilson, your Petitioner's (2) wife, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Violet Arras Wilson to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) J. Wilson

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Third (3) day of February — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Violet Arras Wilson.
2. Sex and Age,	Female. Age 44 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Lady - no occupation.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Curraghmore, Prestwick, Ayr.
7. Place where Found and Examined,	
8. Length of time Insane,	Since August, 1899.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	Under 42 years.
11. When and where previously under Examination and Treatment (3)	Glendrine House, Hendon Aug^t to Dec^r 1899. Prin. Roehampton - Dec^r 99 to June 1900 Dr Stokells, Hayes June 1900 to Oct. 1900.
12. Duration of Existing Attack,	Two and a half years
13. Supposed Cause,	Religious persecutions.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	I think not.
16. Whether Dangerous to others,	No -
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	a - John Wilson, Curraghmore, Prestwick. Husband - b - not to my knowledge.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirty-first day of January — One thousand nine hundred and two years.

(To be signed by the party applying) J. Wilson

& A. C.—Feby. 1901. P p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Andrew Rowand,
being a (1) Doctor of Medicine of Edinburgh University
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3)
Curraghmoor, Prestwick, in the County of
Ayr, separately from any other Medical Practitioner,
visited and personally examined (4) Violet Arras Wilson,
Curraghmoor, Prestwick, and that
the said Violet Arras Wilson, is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is restless, excitable, and unable to concentrate her attention on any occupation. She talks in a rambling way. She has delusions of suspicion & persecution, believing that there is a widespread plot against her on the part of some secret society. She believes that the words and actions of strangers have reference to herself. She has hallucinations of hearing.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her husband informs me that these delusions have persisted for two years, and that at times she seemed almost unmanageable.

Name and Medical Designation, Andrew Rowand M.D.

Place of Abode, 18 Barns St. Ayr

DATED this Thirtieth day of January — One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson,
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Violet Arras Wilson, no occupation, Curraghmore, Prestwick, Ayrshire and that
the said Violet Arras Wilson is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She has peculiar views about religion, and about being brought into the world for a special purpose; talks in an incoherent manner about these things: is suspicious, and thinks that some of her friends belong to secret societies, and that they are conspiring against her.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 11 Castle Street, Dumfries

DATED this Third day of February, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Andrew Rowand, being (1) a Doctor of Medicine of Edinburgh University, hereby certify, on soul and conscience, that I have this day, at (2) Carraghmore, Prestwick in the County of Ayr, seen and personally examined Violet Arras Wilson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Andrew Rowand M.D.

DATED this Thirtieth day of January — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Institute Asylum to receive therein Mrs Violet Arras Wilson, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, J. Wilson — Husband

Signature and Address Carraghmore, Prestwick.

Date 31st January, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Jerve Jamieson, — (1) Sheriff-Substitute of Dumfries and Galloway at Dumfries — having had produced to me, with a Petition at the instance of (2) Mrs Wilson Carraghmore Prestwick Ayr, Certificates under the hands of Andrew Rowand, — and Alexander Turnbull — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) her, the said Petitioner, and that the said Violet Arras Wilson Carraghmore Prestwick Ayr and Mrs Violet Arras Wilson is a (4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Violet Arras Wilson as a patient into the (5) Public — Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Violet Arras Wilson — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Third day of February One thousand nine hundred and two years. — Five words deleted.

To the Superintendent of the (1) Public *Asylum of* Crichton Royal Institution Dumfries.

(1) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8831.

Violet Attas Wilson.

Adm. 31 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Sheriffdom of Dumfries and Galloway *and his Substitutes.*

The Petition of Helen Freeland, Spinster, residing at Portpatrick, Wigtownshire humbly sheweth that it appears, from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Freeland, Spinster, your Petitioner's (3) Sister residing at Portpatrick aforesaid is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Freeland to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Helen Freeland

DATED this twenty-fourth (4) day of January One thousand nine hundred and two years

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Freeland
2. Sex and Age,	Female, 35 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	—
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	—
7. Place where Found and Examined,	Portwilliam
8. Length of time Insane,	unknown
9. Whether First Attack,	unknown
10. Age (if known) on First Attack,	unknown
11. When and where previously under Examination and Treatment (5)	Now here
12. Duration of Existing Attack,	unknown
13. Supposed Cause,	Epilepsy
14. Whether subject to Epilepsy,	yes
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Private Patient
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Helen Freeland Portwilliam Sister no member of family known to be or to have been insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has previously in an asylum, state date of latest admission or approximate thereto. If not previously under examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty-fourth day of January One thousand nine hundred and two years

(*To be signed by the party applying*) Helen Freeland

T. & A. C.—April 1900. P p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Bird Selley being a (1) Doctor of Medicine & licentiate of the Roy al C. of Surgeons Edinburgh Physician & Surgeon (2) Portwilliam in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Freeland Spinster Portwilliam and that the said Elizabeth Freeland is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Has been suffering from Epilepsy for many years She has become stupid & subject to fits of passion & at times of true maniacal Excitement

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Dunlop Inspector of poor - tells me he has been for past very excited & assault her sister

Name and Medical Designation, Robert B Selley

Place of Abode, Portwilliam Wigtownshire

Dated this 24th day of January One thousand nine hundred & two -

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, James T. Smith being a (1) Bachelor of Medicine & Master of Surgery of Glasgow University and being in actual practice as a (2) Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Portwilliam Parish of Mochrum Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Freeland and that the said Elizabeth Freeland is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She has the stupid vacant appearance of a weak minded person, makes no reply when addressed but laughs in an imbecile fashion

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her sister Ellen Freeland Spinster informs me that she has been subject to epilepsy for 20 years that she is unable to perform any household duties & does blindly what she has been used to do before her

Name and Medical Designation, James T. Smith M.B. Ch.

Place of Abode Whithorn

Dated this 24th day of January One thousand nine hundred & two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Mackie Esquire (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Helen Freeland
Certificates under the hands of Robert Bird Selby M. D. Portwilliam
and James Fleming Smith M. B. C. M. Whithorn being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Elizabeth Freeland aforesaid and that the said
Elizabeth Freeland is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Freeland as a patient into the (6) Crichton Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Freeland which accompanied the said Petition.

DATED [at Wigtown] this twenty-fifth day of January
One thousand nine hundred and two years

To the Superintendent of the (7) Crichton
Royal Asylum of Dumfries

[Signature] Wm Mackie

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8832.

Elizabeth Freeland

Admr. 31 January 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes,*— at Dumfries

The Petition of Miss Euphemia McCaig

St. Giddans House, Troon,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Barbara Stuart McCaig your Petitioner's (3) daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Barbara Stuart McCaig — to the Crichton Royal Institution and to sanction the admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) E McCaig

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh (4) day of February One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Barbara Stuart McCaig
2. Sex and Age,	female 30 years
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Living at home.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	St. Medans House Troon
7. Place where Found and Examined,	do do
8. Length of time Insane,	Three years
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	27.
11. When and where previously under Examination and Treatment (5)	Three years Not known
12. Duration of Existing Attack,	
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mother, Euphemia McCaig One brother committed Suicide
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest Form or appendix thereto. If previously under Examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fifth day of February One thousand nine hundred and two years (*To be signed by the party applying*) E McCaig

T. & A. C.—April 1900.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Rotbrugh
being a (1) Doctor of Medicine of Glasgow University
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 57. Middens House Troon in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Barbara Stewart McCaig and that the said Barbara Stewart McCaig is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
Is restless and excited and sleepless. Talking in a rapid & vehement manner accusing her relatives of unkindness. Refuses to answer questions.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her mother, Mrs McCaig, states that she is very irritable & vindictive - gets violent and swears at them. Locks herself in her room and refuses to speak.

Name and Medical Designation, William Rotbrugh.

Place of Abode, Barrell House Troon

DATED this Fifth day of February One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Barbara Stewart McCaig, Spinster, 57 Middens House Troon, Ayrshire, and that the said Barbara Stewart McCaig is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Her Excited appearance: person talking in a rambling and incoherent manner about her affairs and about the people around her —

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D. &c.

Place of Abode 17 Castle Street, Dumfries

DATED this Seventh day of February One thousand nine hundred and two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, William Roxburgh being (1) M.B. & C.M. Glasgow Univ. hereby certify, on soul and conscience, that I have this day, at (2) Troon in the County of Ayr, seen and personally examined Barbara Stewart McCaig, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

William Roxburgh

DATED this Fifth day of February One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Barbara Stewart McCaig to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother

Signature and Address C. McCaig

Date 5th February 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the (1) Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (2) Mrs Euphemia McCaig, St. Middans House, Troon, Certificates under the hands of William Roxburgh and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Barbara Stewart McCaig, St. Middans House, Troon, (Parish) and that the said Barbara Stewart McCaig is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Barbara Stewart McCaig as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Barbara Stewart McCaig which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Eighth, day of February One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution at Dumfries

(5) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No 8833

Barbara Stewart Inclaig

Adm: 5 February 1903

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) ~~County~~ of Dumfries & Galloway and his Substitutes, at Dumfries.

The Petition of James Stafford, Inspector of Poor, Monswald.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Peter Henderson your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Peter Henderson to the Royal Crichton Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Jas. Stafford

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh (4) day of February One thousand nine hundred and Two Years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Peter Henderson
2. Sex and Age,	Male. 45 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer - Policeman six days.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Ruthwell
7. Place where Found and Examined,	Monswald. Westmains
8. Length of time Insane,	About 10 days.
9. Whether First Attack,	
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	Ten days.
13. Supposed Cause,	Has been drinking
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Monswald
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If Patient has previously in an Asylum, state date of latest Order, or approximate. If previously under Medical or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Sixth day of February One thousand nine hundred and Two

(To be signed by the party applying) Jas. Stafford,

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Hugh Cunningham
being a (1) Licentiate of the Royal College of Physicians in Edinburgh and M.D. University of Brussels
and being in actual practice as a (2) physician and surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) County Building Queensbury Street, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Peter Henderson, Most Mains cottage, Monswald, Dumfriesshire, pauper and that the said Peter Henderson is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) His facial expression indicates mental disorder, he imagines that he has plenty of money and that his father died recently and left him two hundred and fifty pounds

2 Other facts (if any) indicating Insanity communicated to me by others: (7) His wife is afraid of him, but hitherto he has not injured her

Name and Medical Designation, Hugh Cunningham M.D.

Place of Abode, 25 Castle Street Dumfries

DATED this sixth day of February One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Geo. Mackie
being a (1) Bachelor of Medicine of the University of Edinburgh
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Peter Henderson
Most mains Cottage, Monswald, Dumfriesshire, pauper and that the said Peter Henderson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He is excited restless and inclined to be violent. He converses incoherently. States that he is a man of great ability & that he is possessed of great wealth, but is not the case. He shows great lack self control and is very weak minded.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, G. Mackie, M.B., C.

Place of Abode Crichton Royal Institution, Dumfries

DATED this Seventh day of February One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hugh Cunningham
being (1) L.R.C.P. & L.R.C.S. of the Royal College of Physicians in Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Burgh Buildings Dumfries
in the County of Dumfries, seen and personally examined
Peter Henderson, pauper, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Hugh Cunningham M.D.

DATED this Sixth day of February One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Dumfries Asylum
~~Asylum~~ to receive therein Peter Henderson
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Jas. Stafford

Date 6th Feb 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute
of the (1) Dumfries & Galloway at Dumfries
having had produced to me, with a Petition at the instance of (2) James Stafford,
Inspector of Poor, Mouswald,
Certificates under the hands of Hugh Cunningham,
and George Mackie, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3)
Peter Henderson, West Mains, Cottage, Mouswald, (a pauper) and that the said
Peter Henderson, is a (4) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Peter Henderson as a patient into the (5) Public Asylum of Brichton Royal Institution and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Peter Henderson, which accompanied the said Petition.

One word deleted.

DATED [at Dumfries] this Eighth day of February One thousand nine hundred and two years.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Shewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

To the Superintendent of the (5) Public
Asylum of Brichton Royal Institution
Dumfries.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No 8834
Peter Henderson.
(Orouswald)
Adm: 6 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Dumfries & Galloway — *and his Substitutes,* — at Dumfries

The Petition of John Maxwell, Inspr. of Poor, Parish of Dragneer —

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Charters —

(4) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (4) Pauper — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Charters — to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(To be signed by the Party applying) John Maxwell

(5) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh (5) day of February One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Charters.
2. Sex and Age,	Male, aged 45 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Working Class. Musician.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Poorhouse. Kirkcudbright.
7. Place where Found and Examined,	Pools Lodging House, Observation.
8. Length of time Insane,	about 3 weeks.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	45 years
11. When and where previously under Examination and Treatment (3)	Never under treatment before.
12. Duration of Existing Attack,	about 3 weeks.
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dragneer Parish.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Has a half brother William James Carter, residing at 48 College St. Maxwelltown None of the family Insane before.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(3) If patient has previously in an Asylum, state date of latest admission or appointment thereto. If previously under observation or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventh day of February One thousand nine hundred & two years.

(To be signed by the party applying) John Maxwell

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, P M Kenny ~~Graduate of Edinburgh~~
being a (1) Graduate of & Licentiate of the Royal Colleges of Physicians & Surgeons of Edinburgh

and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Poole Lodging House
Market St Macclesfield in the County of
Cheshire separately from any other Medical Practitioner,
visited and personally examined (4) James Charles Cooper
Market St Macclesfield and that
the said James Charles Cooper is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) says he has
clothes and the fire, that the wardens
wardens to get out of Workhouse
I saw him in the Prison, from there
on the 7th Inst.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Conducted himself so outrageously at
Lodging, and in the Workhouse, that
he had to be sent away

Name and Medical Designation, P M Kenny M.D.

Place of Abode, 33 Castle St Macclesfield

Dated this Fourth day of February One thousand
nine hundred & two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Dewar Robson
being a (1) Graduate of Durham University

and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Poole's Lodging House
Market St Macclesfield in the County of
Cheshire separately from any other Medical Practitioner,
visited and personally examined (4) James Charles, Pauper
Market St Macclesfield and that
the said James Charles Pauper is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He has a habit
of making certain meaningless actions as
in Prison. He admits having put Clothes into fire
at Workhouse. Was violent. Is inclined to be noisy
& unruly.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
He tore his shirt & clothes before Poole the
Lodging House keeper has on various occasions been
outrageous, especially at night. & annoys the neighbours

Name and Medical Designation, John Dewar Robson M.B.

Place of Abode 7 Temple St. Macclesfield

Dated this Eighth day of February One thousand
nine hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, P. M. Murray
being (1) Graduate of Dublin University (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Market St Maxwelltown (2) State place of examination.
in the County of Kirkcudbright Lawn House, seen and personally examined
, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries. (3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

P. M. Murray M.D

DATED this Seventh day of February One thousand nine hundred & two years

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum
~~Asylum~~ to receive therein James Charters
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, applicants pauper.

Signature and Address John Maxwell, 23 King St

Date 7th February 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (1) Sheriff-Substitute (1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
of Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) John Maxwell (2) State whether a County or Stewartry.
Inspector of Poor, Dumfries,
Certificates under the hands of P. M. Murray,
and John Dewar Robson being two Medical Persons (3) Insert Name and Designation.
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Charters, Pole Lodging House, Market Street, Maxwelltown (a pauper) and that the said James Charters is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said James Charters as a patient into the (6) Public Asylum of Southern Counties at Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Charters, which accompanied the said Petition. (4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Eighth day of February, One thousand nine hundred and two years.

To the Superintendent of the (6) Public, *Asylum of* Southern Counties Dumfries.

[Signature] Geo. Campion (6) Public, District, Parochial, or Private.

No. 8835

James Chalters.

(Proquest)

Adm: 4 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) ~~Sheriff of the County~~ of Dumfries ~~Galloway~~ *and his Substitutes, at Dumfries.*

The Petition of William Wells, 20 Rotheray Gardens, Partick,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Wells, Ivanhoe Cottage, Lemfoland, Son,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Wells, ——— to the Crichton Royal Asylum, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) William Wells

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 10th (4) day of February — One thousand ~~eight hundred and~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Wells.
2. Sex and Age,	male. 21 years.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	Joiner Apprentice.
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	20 Rotheray Gardens, Partick.
7. Place where Found and Examined,	Ivanhoe Cottage, Lemfoland, Dalmadam.
8. Length of time Insane,	14 days.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	never under treatment before.
12. Duration of Existing Attack,	14 days.
13. Supposed Cause,	are ignorant from whatever death.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Wells, 20 Rotheray Gardens, Partick. (Father) — an insane 15 years ago.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this 9th day of February, — One thousand ~~eight~~ nine hundred and two years

be signed by the Party applying) William Wells

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Mcmaskid, being a (1) Doctor of Medicine of Glasgow University, and being in actual practice as a (2) General Practitioner, do hereby certify, on soul and conscience, that I have this day, at (3) Wombwell Cottage, Templand, Lochmaben, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) James Wells, Wombwell Cottage, Templand, Lochmaben, and that the said James Wells, is a (5) Person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is shouting and swearing and threatening all sorts of violence at any one who comes near him. he is in a maniacal state never at rest for a minute and says that he never need rest now which is a delusion.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Margaret Wells, his aunt says, that they have had to get some nights with him. that he made out that they might not sleep but he constantly talking, unusual hardly restrain him.

Name and Medical Designation, Mcmaskid. M.D.

Place of Abode, Lochmaben

DATED this 9th day of February One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Dewar Robson, being a (1) Graduate of Edinburgh University, and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Asylum, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) James Wells, Wombwell Lockmaben, and that the said James Wells, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is impulsive in action & remains in answering questions. he talks in conversation. Imagines he is in Glasgow & that he is in this institution to see the world. Speaks me as Lord Londonderry, & next as a comrade volunteer

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) That he has been violent in his actions, & is maniacal in company of others.

Name and Medical Designation, John Dewar Robson

Place of Abode Terregles St. Dumfries

DATED this Tenth day of February One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, M'Cunnachie, of Glasgow University being (1) a Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) Ivanhoe Cottage, Templand in the County of Dumfries, seen and personally examined James Wells, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum, and that he can remain without injury to his health to the Asylum at Dumfries. And I further certify that the case of the said person is one of Emergency.

Memorandum

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein James Wells to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address William Wells 20 Polhosay Gardens Partick

Date 9th February 1902

Wells, 20 Polhosay Gardens, Partick, Glasgow, Certificates under the hands of Thomas Reid and John Stewart Robson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Wells, Ivanhoe Cottage, Templand, Kirkmahoe, Dumfries, and that the said James Wells is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Wells, as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Wells, which accompanied the said Petition.

DATED this 10th day of February One thousand ~~eight~~ nine hundred and two years. Sheriff Substitute.

Geo. Lumpton

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Memorandum of Glasgow University
being a (1) Doctor of Medicine
and being in actual practice as a (2) General Practitioner,
do hereby certify, on soul and conscience, that I have this day, at (3) Woodside Cottage, Lumpland, Lochmaben, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) James Wells, Woodside Cottage, Lumpland, Lochmaben, and that the said James Wells is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is shouting and [redacted] and threatening all sorts of violence [redacted] for years.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Dewar Robertson

Place of Abode Terregles St. Dumfries

DATED this Tenth day of February One thousand eight hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dewar Robertson,
being a (1) Graduate of Edinburgh University,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Asylum, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) James Wells, Woodside Cottage, Lumpland, Lochmaben, and that the said James Wells, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is impulsive in action & insane in answering questions. Incoherent in conversation. Imagines he is in Glasgow & that he is in this institution to see the world. Speaks of me as Lord Londonderry, & next as a common policeman.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

That he has been violent in behaviour, & is maniacal in company of others.

Name and Medical Designation, John Dewar Robertson

Place of Abode Terregles St. Dumfries

DATED this Tenth day of February One thousand eight hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Macmartin, of Glasgow, unmarried, being (1) a Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) Ivanhoe Cottage, Lamplands in the County of Dumfries, ——, seen and personally examined James Wells, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum, and that he can remain with safety to his health at the Asylum at Dumfries.

And I further certify that the case of the said person is one of Emergency.

Macmartin. M.D.

DATED this 9th day of February One thousand ~~eight~~ nine hundred and two years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampion (3) Sheriff-Substitute of ~~Dumfries and Galloway~~, at Dumfries, having had produced to me, with a Petition at the instance of (4) William Wells, 20 Rothesay Gardens, Partick, Glasgow, Certificates under the hands of Thomas Reid and John Stewart Robson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) James Wells, Ivanhoe Cottage, Lamplands, Dalmahoy, ~~Dumfries~~, and that the said James Wells is a (6) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Wells, as a Patient into the (7) Public Asylum of ~~Crichton Royal Institution~~, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Wells, which accompanied the said Petition.

DATED this Tenth day of February One thousand ~~eight~~ nine hundred and two years. One word delfted.

Geo. Lampion

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8886.

James Wells.

Adm. 9 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the~~ (2) Shire of Dumfries ~~& Galloway~~ *and his Substitutes,*—or Dumfries

The Petition of Francis Dodds, Inspector of Poor, Parish of Morton, Thornhill:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Bryden ——— your Petitioner's (3) ~~Patient~~ Pauper, ———

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Joseph Bryden, ——— to the Crichton Royal Institution — and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Francis Dodds

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Sixth — (4) day of February, — One thousand ~~eight hundred~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Joseph Bryden.
2. Sex and Age,	(M — 62 years.
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous Occupation (if any),	Single, Quarryman.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Parish of Dunscore.
7. Place where Found and Examined,	Burnbrae (Thornhill)
8. Length of time Insane,	Three weeks or there about.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	56 or 57.
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	1896 Parish of Morton, Crichton Royal Institution Dumfries 1896.
12. Duration of Existing Attack,	About three weeks.
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Morton till parish of settlement is ascertained,
18. Date of becoming Chargeable,	Feby — 6th — 1902.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Unknown; no member of family known to be insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 6th — day of February, — One thousand ~~eight~~ nine hundred and two years. (*To be signed by the party applying*) Francis Dodds

Inspector of Poor Morton.

P.P.

T & A. C.—Dec. 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind."

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Mungo Byson, being a (1) Bachelor of Medicine & master in Surgery, and being in actual practice as a (2) Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) Burnbrae cottage, Thornhill in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Joseph Bryden, Pauper, Burnbrae cottage, Thornhill, and that the said Joseph Bryden is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) States that he is persecuted — says that I want to give him drugs to do him harm — that I gave him drugs eleven years ago which caused him to be taken to asylum (I had not seen him before) - looks his door refuses to hold any communication with his neighbours.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Alex. Pattinson, Burnbrae cottage states that Bryden has told him that the police were after him, and that his neighbours annoyed him. Wm Pattinson son of Alex Pattinson gives similar evidence.

Name and Medical Designation, Mungo Byson

Place of Abode, Thornhill Dumfries shire

DATED this ninth day of February, One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Dunlop, being a (1) Bachelor of medicine & Master in Surgery (Glas. Univ.) and being in actual practice as a (2) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) Burnbrae cottages, Thornhill in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Joseph Bryden, Pauper, and that the said Joseph Bryden, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Facial expression. Irritability of temper. Severe constant headache refuses to associate with or speak to neighbours, and keeps his door always barred. -

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mrs Pattinson, Burnbrae cottage informs me that Joseph Bryden is very queer in manner, keeps his door locked and will allow nobody to enter his room except herself. -

Name and Medical Designation, Thomas Dunlop M.B.Ch.

Place of Abode Thornhill Dumfriesshire

DATED this sixth day of February, One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

X I, the undersigned, Mungo Bryson
being (1) Bachelor of Medicine & Master in Surgery — (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Burnbrae Cottages (2) State place of examination.
in the County of Dumfries, seen and personally examined
Joseph Bryden Burnbrae Cottages, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

And is in a sufficiently good state of bodily health at this date to be removed to the Asylum as mentioned.

Mungo Bryson

DATED this Tenth day of February One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution
~~Asylum~~ to receive therein Joseph Bryden
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor for Parish of Morton

Signature and Address Francis Dodds: Thornhill

Date 6th February 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff Substitute — (1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
of the (2) Dumfries & Galloway, at Dumfries — (2) State whether a County or Stewartry.
having had produced to me, with a Petition at the instance of (3) Francis Dodds, (3) Insert Name and Designation.
Inspector of Poor, Morton, Thornhill,
Certificates under the hands of Mungo Bryson,
and Thomas Dunlop, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) (4) Describe him, and if a Pauper, state so.
Joseph Bryden, Burnbrae Cottages, Thornhill (a pauper) and that the said
Joseph Bryden, is a (5) person of unsound mind (5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Joseph Bryden, as a Patient into the
(6) Public Asylum of Crichton Royal Institution, and I authorize (6) Public, District, Parochial, or Private.
you to Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph Bryden
which accompanied the said Petition.

DATED this Eleventh day of February, One thousand ~~eight~~ nine hundred and two years.

Geo. Campion

To the Superintendent of the (7) ~~Crichton~~ Public *Asylum of* Crichton Royal Institution (7) Public, District, Parochial, or Private.

Three words deleted. Jas. Leigh.

No. 8884.

Joseph Bryden

(Thorton).

Adm. 10 February 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Dumfries & Galloway, *and his Substitutes,—at* Dumfries:

The Petition of John Maxwell, Inspector of the Poor for the Parish of Drogheri humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Fagan,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Fagan, to the Southern Counties Asylum, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) John Maxwell

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (4) day of February, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Fagan.
2. Sex and Age,	Female. aged 15 years.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	Working class. Millworker.
5. Religious Persuasion, so far as known,	Roman Catholic.
6. Previous Place of Abode,	10 David St. Maxwelltown.
7. Place where Found and Examined,	same place.
8. Length of time Insane,	about one week.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	15 years.
11. When and where previously under Examination and Treatment (5)	Never under treatment before
12. Duration of Existing Attack,	about a week.
13. Supposed Cause,	not known.
14. Whether subject to Epilepsy,	Yes. since about 5 years old.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Threatened to strike her mother with the poker.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Drogheri.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Father. James Fagan a Labourer resides with 10 David St. Maxwelltown.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has previously in an Asylum, state the date of latest admission or approximate thereto. If previously under examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eleventh day of February, One thousand nine hundred and 2 years.

(To be signed by the party applying) John Maxwell

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray, ——
being a (1) graduate of Edenburgh University —
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 10 David
Maxwelltown Terrace, — in the County of
Kirkcudbright, separately from any other Medical Practitioner,
visited and personally examined (4) Mary Fagan, Pauper, 10 Da
Maxwelltown,
the said Mary Fagan, —— is a (5) person of
unsound mind, —— and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is very excited,
not go to bed, because the clock went
sleeping, says she is starved, must fe
refusing no provocation told me to g
a situation for her to speak crow,

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her father told me that the step
Mother not to bed with the fe

Name and Medical Designation, Patrick Murray M

Place of Abode, Castle St Dumfries

DATED this tenth day of February One thousand
nine hundred & two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Dewar Robson, ——
being a (1) graduate of Edenburgh University,
and being in actual practice as a (2) Physician, ——
do hereby certify, on soul and conscience, that I have this day, at (3) 10 David St
Maxwelltown, Dumfries, — in the County of
Kirkcudbright, separately from any other Medical Practitioner,
visited and personally examined (4) Mary Fagan. Pauper, 10 D
Maxwelltown and that
the said Mary Fagan pauper. is a (5) person
of unsound mind. —— and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) When seen by me
all she was wearing was her stockings & chemise. Required
put them out of her clothes on. and some warm. She was
indecent in her behaviour. and is filthy in her habits.
She refused to answer questions

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

per mother owns she struck her over the hea
without any provocation. That she is violent
in her behaviour, attacking the other children Sh
she is filthy & lazy in her habits and uses profane la
must go to bed but walks about night.

Name and Medical Designation, John Dewar Robson MB

Place of Abode 1 Terraglen St Maxwelltown

DATED this 10th (ten) day of February One thousand
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Patrick Murray
being (1) Graduate of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) Maxwelltown
in the County of Kirkcudbright, seen and personally examined
Mary Fagan, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries:-

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Patrick Murray M.D

DATED this tenth day of February, One thousand nine hundred & two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties ~~Combination~~
Asylum to receive therein Mary Fagan
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Applicants Pauper.

Signature and Address John Maxwell. 23 King St

Date 11th February 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I George Lampson, (1) Sheriff-Substitute,
of ~~Dumfries and Galloway~~ at Dumfries,
having had produced to me, with a Petition at the instance of (2) John Maxwell,
Inspector of Poor, Dalbeattie,
Certificates under the hands of Patrick Murray,
and John Edwar Kolson being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Fagan, W.P. 19 David Street, Maxwelltown (a pauper), and that the said Mary Fagan, is a (5) person of unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Fagan as a patient into the (6) Public Asylum of Southern Counties at Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Fagan, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state it.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this twelfth day of February, One thousand nine hundred and two years.-

To the Superintendent of the (7) Public, *Asylum of* Southern Counties Dumfries.

Geo: Lampson
[Signature]

(7) Public, District, Parochial, or Private.

No. 8838.

Mary Yagan.

(Iroquois)

Adm: 11 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries of Galloway, — *and his Substitutes,*— at Dumfries:

The Petition of Grace Symington Richardson, Castle Douglas:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs. Isabella Richardson, —

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Mother, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs. Isabella Richardson, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Grace Symington Richardson

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirteenth (4) day of February, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Isabella Richardson.
2. Sex and Age,	F. 61.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Gentlewoman.
5. Religious Persuasion, so far as known,	Established Church of Scotland.
6. Previous Place of Abode,	Castle Douglas.
7. Place where Found and Examined,	Castle Douglas.
8. Length of time Insane,	7 weeks.
9. Whether First Attack,	Slight attack 3 years ago.
10. Age (if known) on First Attack,	58.
11. When and where previously under Examination and Treatment (5)	At home.
12. Duration of Existing Attack,	2 months.
13. Supposed Cause,	Shock to nervous System.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Annie Isabel Richardson, The Temperance Hospital, Hampstead Road, London N.W. Daughter. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest or approximate date. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 13th — day of February, — One thousand nine hundred and two years.

(To be signed by the party applying) Grace Symington Richardson

P. P.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Bell Lorraine, ~~Surgeon~~ Graduate of Edinburgh being a (1)

and being in actual practice as a (2) General Practitioner, do hereby certify, on soul and conscience, that I have this day, at (3) St Andrew Castle Douglas, in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Isabella Richardson, and that the said Isabella Richardson, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
is violent talks incoherently & incessantly requires to be fed sometimes admits by tube has many hallucinations.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Nurse MacLeish tells me she is at times violent- struggles to strike her. is incoherent- rambling in speech. many delusions

Name and Medical Designation, Robert Bell Lorraine

Place of Abode, Castle Douglas

DATED this 12th day of February, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson being a,(1) Doctor of Medicine of Glasgow University and Licentiate of the Royal College of Physicians and Surgeons of Edinburgh and being in actual practice as a (2) Physician and Surgeon — do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Isabella Richardson, Widow, Castle Douglas, and that the said Isabella Richardson is a (5) person of unsound mind, — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks in a very incoherent manner, about many things — especially about her bodily condition and about being unable to sleep at night on account of noises & voices, which cannot be explained —

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson

Place of Abode, 27 Castle Street, Dumfries

DATED this Thirteenth day of February, One thousand nine hundred and two years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Robert Bell Lorraine, castle Douglas, being (1) A Graduate of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) St Andrew Street in the County of Kirkcudbright, seen and personally examined Isabella Richardson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

Robert Bell Lorraine M.B.

DATED this 12th day of February, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Isabella Richardson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Daughter

Signature and Address Isabella Richardson Castle Douglas

Date 12th February 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (1) Sheriff Substitute of the Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Grace Symington Richardson, 4 St Andrew Street, Castle Douglas Certificates under the hands of Alexander Robert Bell Lorraine, and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Mrs Isabella Richardson, Widow, 4 St Andrew St. Castle Douglas and that the said Mrs Isabella Richardson is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Isabella Richardson as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Isabella Richardson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(3) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Thirteenth day of February One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution Dumfries.

[Signature] Geo. Campion

(5) Public, District, Parochial, or Private.

No. 8889.

Isabella Richardson.

Adm: 12 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries ~~Kirkcudbright~~ *and his Substitutes,* ~~at Dumfries.~~

The Petition of James Halliday Laylead, Girthon, Kirkcudbrightshire.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Halliday, ~~after designed~~ Father,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Halliday, ——— to the Southern Counties Asylum, ——— and to sanction his admission into the said Asylum.

(To be signed by the Party applying) James Halliday.

(4) The date of the Petition must be within fourteen clear days ~~eight~~ following the dates of the Medical Certificates.

DATED this thirteenth (4) day of February, — One thousand ~~eight~~ hundred and nine two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Robert Halliday.
2. Sex and Age,	male - 47 years -
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous Occupation (if any),	Farmer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Laylead.
7. Place where Found and Examined,	Laylead.
8. Length of time Insane,	one week.
9. Whether First Attack,	~~Yes~~ ~~Laylead~~.
10. Age (if known) on First Attack,	forty seven years.
11. When and where previously under Examination and Treatment (5)	no where -
12. Duration of Existing Attack,	one week.
13. Supposed Cause,	Melancholia.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Halliday - Son - Laylead - Girthon, Kirkcudbrightshire. no -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Asylum or Hospital, state the date of latest admission, or approximate date thereof. If not previously under observation or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this thirteenth day of February — One thousand ~~eight~~ nine hundred and two.

(To be signed by the party applying) James Halliday.

T. & A. C.—May 1898.

P p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Dott
being a (1) Graduate of Edinburgh Universi
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) Laghead,
Kirkcudbright, separately from any other Medical Practitioner,
visited and personally examined (4) Robert Halliday
and that the said Robert Halliday, is a (5) person
of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Inability to hold any rational conversation. He is under delusion that he has no provender for his Cat. he has sufficient. Has given part of his Stock, other declares he is ruined. thinks he suffers from Phthisis & other ailments which he does not. His manners & conduct are to variance with his usual habits.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his Son James Halliday & his friends inform me does not sleep at night. Sometimes he lies most the in bed; at other times he wanders continually about room. wants to dispose of his stock under the va he has no provender. He is incoherent in his conversat

Name and Medical Designation, Alexander Dott

Place of Abode, Gatehouse of Fleet

DATED this thirteenth day of February, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Nichol Cox
being a (1) Licentiate of the Royal College of Surgeons Edinb
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Laghead,
Kirkcudbright, in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Robert Halliday,
and that the said Robert Halliday, is a (5) person
of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Extremely incoherent & rambling in his talk, very excited & cannot keep on a connected conversation, & declares his illness is a judg of the Almighty - also declares he is ruined which is no fact -

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) he has for some time been in a very excited state & has not been sleeping. has been drawing off his stock & the James Whiting he had no fodder for it which is not the case -

Name and Medical Designation, Nichol Cox L.R.C.S. Ed

Place of Abode Woodlea, Gatehouse N.B.

DATED this thirteenth day of February, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, }

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire advocate Sheriff Substitute — of ~~the~~ (1) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) James Halliday Laghead ~~Kirkmichael Gatehouse~~, Gatehouse, — Certificates under the hands of Alexander Pott, — and James Nichol Coy, — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert Halliday Laghead, ~~Gatehouse, Kirkmichael~~ Gatehouse, and that the said Robert Halliday Robert Halliday, is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Halliday, — as a Patient into the (6) Public Asylum of Southern Counties, and I authorize ~~his~~ her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Halliday, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Idiote Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fourteenth day of February, — One thousand ~~eight~~ nine hundred and five years.

To the Superintendent of the (6) Public
Asylum of Southern Counties, at Dumfries.

[*Signature*] Geo: Campion

No. 8910

Robert Halliday.

Adm. 14 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (1) Dumfries & Galloway — *and his Substitutes, at* Dumfries:

The Petition of Mary Thompson, Cookstown, Co. Tyrone, Ireland,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Thompson, Brother

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Thompson, — to the Dumfries Royal Asylum, and to sanction the admission into the said Asylum.

(To be signed by the Party applying) Mary Thomson

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Nineteenth (3) day of February, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Thomson.
2. Sex and Age,	Male. 31 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Medical Practitioner.
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Carnmoney. Co Antrim.
7. Place where Found and Examined,	Rutherglen. Co Lanark.
8. Length of time Insane,	Five Weeks.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	31 years.
11. When and where previously under Examination and Treatment (3)	Not under treatment before.
12. Duration of Existing Attack,	Five Weeks.
13. Supposed Cause,	Excitement & alcoholism
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Thomson — Father — Cookstown Co Tyrone Ireland. No insanity in family.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(3) If patient has previously in an Asylum, state date of latest Order or Appointment thereto. If previously under Treatment or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Nineteenth day of February One thousand nine hundred and two years.

(To be signed by the party applying) Mary Thomson

P. P.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Michael Loughman of the
being a (1) Licentiate of the Royal College of Phys.
& Surgeons Ireland,
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Killygar
Buttermillan,
in the County of
Donegal, Ireland, separately from any other Medical Practitioner,
visited and personally examined (4) Doctor John Thomson
and that
the said Dr John Thomson is a (5) Person of un-
sound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

The Subject is incapable of ideas or
Impulsive activity. Is incoherent in speech
& totally unable to Converse rationally. -

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His sister states he awoke and spoke
shaking he had division. Sees his brother
Reverend Angels &c. also spoke of Deceased friend

Name and Medical Designation, Michael Loughman
L.R.C.P.S.I.

Place of Abode, Buttermillan. Co Donegal

DATED this Seventeenth day of February, One thousand
nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Joseph Byrne
being a (1) Fellow of the Royal College of Surgeons
Ireland,
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Terminus
of the Northern Counties Railway Station, in the County of
Londonderry, separately from any other Medical Practitioner,
visited and personally examined (4) John Thomson a patient for
the present, practises at Portnoo and who lately resided
at Buttermillan Co. Donegal and that
the said John Thomson is a (5) person of unsound
mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is noisy, incoherent
troublesome. has delusions that I am in town several doctors
he knows: He is restless - sleeps little: speaks filthy langua
believes he is receiving electric shocks:
He has haematoma of both ears
I have had him under observation for 6 weeks.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his
wife, Mary Thomson of Cockalaton has been with him for some
and has had to employ 5 men to mind him: He found he was
if he were left to himself: She has had great anxiety with
him. She says he is never coherent and has been full of
delusions and very troublesome

Name and Medical Designation, Joseph Byrne
L.R.C.S.I.

Place of Abode, 24 Temple St-North Dublin

DATED this 19th day of February, One thousand
nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Joseph Byrne, L.R.C.S.I. Physician in Belfast, being (1) a member of the Royal College of Physicians in Ireland, hereby certify, on soul and conscience, that I have this day, at (2) Londonderry in the County of Londonderry, seen and personally examined John Thomson, ——, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Joseph Byrne

Dated this 19th day of February, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein John Thomson, —— to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister

Signature and Address Mary Thomson Cookstown Co. Tyrone.

Date 19th February 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of the (1) Dumfries & Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Mary Thomson Cookstown, Co. Tyrone, Ireland Certificates under the hands of Michael Loughran, —— and Joseph Byrne, —— being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) John Thomson, L.R.C.P.&S.I. (Edinburgh & Glasgow) (Post 23 Broth.) and that the said John Thomson, is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said John Thomson, as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Thomson, —— which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

Dated [at Dumfries,] this Twenty fifth day of February, One thousand nine hundred and two years. — Three words deleted

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution Dumfries.

(5) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 88141.

John Thomson.

Adm: 19 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Ayr and his Substitutes—

The Petition of John Eglinton Cameron Engineer 23 Kelvinside Gdns Glasgow

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Bigart Hunter, or Cameron your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Bigart Hunter, or Cameron to the Crichton Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John Eglinton Cameron

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this nineteenth (4) day of February One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Bigart Hunter, or Cameron
2. Sex and Age,	female, age 32 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	wife
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	4 Greenside, Govan.
7. Place where Found and Examined,	4 Greenside, Govan.
8. Length of time Insane,	ten days
9. Whether First Attack,	second attack
10. Age (if known) on First Attack,	24 years
11. When and where previously under Examination and Treatment (5)	Feb 1897, Gartnavel Asylum.
12. Duration of Existing Attack,	ten days
13. Supposed Cause,	none
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	———
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Eglinton Cameron, 23 Kelvinside Gardens, Glasgow, husband. no member of family insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

(5) If patient has previously been in an Asylum, state name and date of latest admission or approximate thereto. If previously under Examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this nineteenth day of February One thousand nine hundred and two

(To be signed by the party applying) John Eglinton Cameron

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas McGeoch being a (1) Bachelor of Medicine and Master in Surgery, of Glasgow University and being in actual practice as a (2) General Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 7 Greenside, Girvan, Ayr in the County of separately from any other Medical Practitioner, visited and personally examined (4) Margaret Bigart Hunter, or Cameron Housewife, 7 Greenside, Girvan. and that the said Margaret Bigart Hunter, or Cameron is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has hallucinations. She says messengers come to her from God & instruct her to do things. She says a little is saying on her behalf & asks if those around her do not hear the sounds of war. She is very violent at times & wishes to get out of the house. She thinks her husband & father & sisters have conspired to oppress her.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She sometimes refuses food saying she is a spirit & does not need food. Mrs William Muir, 4 Greenside. She often starts up saying the bed is on fire & trying to escape it. Jessie Hunter

Name and Medical Designation, Thomas McGeoch MB CM.

Place of Abode 9 Hookashan Street, Girvan, Ayrshire

DATED this nineteenth day of February One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, George Valentine being a (1) Bachelor of Medicine and Master of Surgery of Glasgow University and being in actual practice as a (2) General Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 7 Greenside Girvan, Ayr in the County of separately from any other Medical Practitioner, visited and personally examined (4) Margaret Bigart Hunter or Cameron 7 Greenside Girvan Housewife and that the said Margaret Bigart Hunter or Cameron is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has delusions & hallucinations. Thinks she is taking charge in her bed & that God is there. That God ordered her to burn the house. Thinks she is in prison & that there is a white cross on her forehead is sometimes going stretched like a cross & at other shaking & singing.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Says her friends imagines she is wealthy & has bricks of gold in her bed is sometimes very violent & other quite moody and silent sees fights going on in her bed & God is there. God ordered her to burn the house. Mrs William Muir 7 Greenside, her sister Jessie Hunter, and husband John E. Cameron

Name and Medical Designation, George Valentine MB CM

Place of Abode Hamilton St Girvan

DATED this Nineteenth day of February One thousand nine hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the

Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, I Hugh Douglas Millwood Esq Sheriff Substitute
of the (4) County of Ayr
having had produced to me, with a Petition at the instance of (5) John Robertson Cameron, Surgeon, 23 Silvermade Gardens Glasgow
Certificates under the hands of Thomas McLeod M.B.C.M.
and George Valentine M.B.C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Margaret Bigatt Hunter or Cameron and that the said Margaret Bigatt Hunter or Cameron is a (7) Person Romanus mond and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Bigatt Hunter or Cameron as a patient into the (8) Crichton Institution Asylum at Dumfries and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Bigatt Hunter or Cameron which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(8) Public, District, Parochial, or Private.

DATED [at Ayr] this 19th day of February One thousand nine hundred and two

To the Superintendent of the (8)
~~Asylum of~~ Crichton Institution
Dumfries.

[*Signature*] H D Millwood

No 8842.

Margaret Bigart Hunter or Cameron

Adm: 19 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,* — at Dumfries.

The Petition of Emma Catherine Bulman,

Station Road. Whitley Bay, Northumberland:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Frederick George Bulman,

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) husband, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Frederick George Bulman — to the Crichton Royal Institution — and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Emma Catherine Bulman

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty-first (4) day of February, — One thousand nine hundred and two. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Frederick George Bulman.
2. Sex and Age,	Male 36 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	—
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	1 Station Road Whitley Bay,
7. Place where Found and Examined,	ditto ditto Northumberland.
8. Length of time Insane,	Six months.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Six months.
13. Supposed Cause,	alcohol.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Emma Catherine Bulman, wife. 1 Station Road Whitley Bay Northumberland. no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest Medical Certificate. If previously under Examination or Treatment elsewhere, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty-first day of February, — One thousand nine hundred and two.

(To be signed by the party applying) Emma Catherine Bulman

P. p.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Tibbald Campbell, ——
being a (1) M.B., C.M. Edinburgh, ——
and being in actual practice as a (2) Physician & Surgeon, ——
do hereby certify, on soul and conscience, that I have this day, at (3) ——
1 Station Road, Whitley, —— in the County of
Northumberland separately from any other Medical Practitioner,
visited and personally examined (4) Frederick G. Bulman
Tobacconist 1 Station Rd Whitley, North'd —— and that
the said F. G. Bulman, —— is a (5) person
of unsound mind, —— and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He states that he is busy with his business & has just been making up his weekly accts which he has not done for 6 months. He states that he is a present doing business as a Commercial traveller which is untrue. He cannot remember what occurred yesterday. His speech is defective & he laughs without cause. His lips are tremulous & he is closely in his

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his wife states that he has more than once attacked her, & put her by the throat — without any provocation he kicked Peter Ernest Gray and Wm Dobbin
He said he was going to make a motor car out of a toy horse

& traces the same information by J. Bell. Brampton medicine

Name and Medical Designation, W. T. Campbell

Place of Abode, 20 St Mary's Av Whitley

DATED this 20th day of February, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, George Lennie Kerr Knight, ——
being a (1) Doctor of medicine of Edinburgh University
and being in actual practice as a (2) Physician & Surgeon, ——
do hereby certify, on soul and conscience, that I have this day, at (3) 1 Station Rd
Whitley Bay R.S.O. —— in the County of
Northumberland, — separately from any other Medical Practitioner,
visited and personally examined (4) Fredrick George Bulman,
Tobacconist 1 Station Road Whitley Bay, Northumberland and that
the said Fredrick George Bulman, —— is a (5) person
of unsound mind — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His speech is indistinct
& he has become slovenly in his dress.
He states that he was at his newcastle shop last friday week
(which has not been at for some months). He is going to erect
a tobacco factory somewhere on the west coast. near Whitehaven or
is not his case.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
John Graham. (friend). He says he is going to make a motor car out of the one
in cutting the chains to make Billiard Tables.
Ernest Gray (friend). He is always talking of his business, but never goes
inside the door of his shops. Has large ideas of setting up a Tobacco factory

Name and Medical Designation, G. Centrie de Lisle M.D.

Place of Abode, 32 Victoria Avenue Whitley

DATED this 20th day of February, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, William Gibbald Campbell, being (1) MB CM Edin. hereby certify, on soul and conscience, that I have this day, at (2) 1 Station Rd, Whitley in the County of Northumberland, seen and personally examined Frederick Geo Bulman, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries, N.B.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

W. G. Campbell

DATED this 20th day of Feb. — One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution, Asylum to receive therein Frederick Geo Bulman, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Wife

Signature and Address Emma Catherine Bulman

Date 21st February, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson (1) Sheriff-Substitute of ~~Dumfries and~~ Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Emma Catherine Bulman, 1 Station Road, Whitley Bay, Northumberland, Certificates under the hands of William Gibbald Campbell and George Lorain Herr Pringle being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Frederick George Bulman, 1 Station Road, Whitley Bay, Northumberland, and that the said Frederick George Bulman is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Frederick George Bulman as a patient into the (6) Public — Asylum of Crichton Royal Institution and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Frederick George Bulman which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this twenty-second day of February One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

[*Signature*] Geo: Lampson

(7) Public, District, Parochial, or Private.

No. 8848.

Frederick George Bulman.

Adm: 21 February 1902.

S.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,* — at Dumfries:

The Petition of Mrs Elizabeth Campbell Ballyveasey. Carnmoney Co Antrim Ireland:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Campbell, —

your Petitioner's (3) Husband, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Campbell, — to the Crichton Royal Institution, — and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Elizabeth Campbell

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty seventh day of February, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Campbell.
2. Sex and Age,	male; 60 years of age.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Farmer.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Ballyveasey.
7. Place where Found and Examined,	Ballyveasey.
8. Length of time Insane,	3 weeks.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	3 weeks
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	not unless contradicted.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Campbell. Brother. Ballyveasey, Carnmoney, Co Antrim. Yes one uncle, Hugh Campbell died insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under Medical or Surgical Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty sixth day of February, One thousand nine hundred and two years.

(*To be signed by the party applying*) Elizabeth Campbell

P. p.

T. & A. C.—April 1901.

(*) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the street and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(*) *State the facts.*

(*) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Richard James Purdon

being a (*) Doctor of Medicine of Royal University of Ire

and being in actual practice as a (*) Physician and Surgeon

do hereby certify, on soul and conscience, that I have this day, at (*) 8 Murray's Terrace Belfast, in the County of Antrim, Ireland, separately from any other Medical Practitioner visited and personally examined (*) James Campbell of Ballycreasy Carnmoney, Co Antrim and that the said James Campbell is a (*) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (*) habitually reticent on any subject, scribbling talk — very communicative about his private affairs to a Stranger, extreme nervousness, cannot keep him at rest, very fidgetty for any time —

2. Other facts (if any) indicating Insanity communicated to me by others: (*) Joseph Kell, of Mallusk Co. Antrim Brother in law states, that patient's manner and disposition is quite altered he is nervous, and irritable headstrong and obstinate & talkative the other day stripping his boots, coat, & waistcoat

Name and Medical Designation, Richard James Purdon M.D.

Place of Abode, 8 Murray's Terrace Belfast

Dated this twenty-fifth day of February — One thousand nine hundred and two.

(*) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a pauper state so.*

(*) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(*) *State the facts.*

(*) *State the information and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Isaac Chichester Dunbar

being a (*) Doctor of Medicine of Royal University. Ire

and being in actual practice as a (*) Physician & Surgeon

do hereby certify, on soul and conscience, that I have this day, at (*) Ballycreasy Carnmoney, Antrim, Ireland, separately from any other Medical Practitioner, visited and personally examined (*) James Campbell of Ballycreasy Carnmoney Co Antrim, and that the said James Campbell, is a (*) Person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (*) I have known James Campbell for years, as a quiet reticent man, he has suddenly become very excited and constantly talking & whistling. Always at work with hands: at times dancing; working with pipes, and if not diverted from it does not have a tendency to become violent — Has insomnia

2. Other facts (if any) indicating Insanity communicated to me by others: (*) Had a slight apoplectic seizure in october last; Has a family history of insanity on his Fathers side — His wife informs that he is absolutely changed.

Name and Medical Designation, Isaac C. Dunbar B.A.

Place of Abode, Carnmoney Belfast

Dated this 26th day of February — One thousand nine hundred and Two —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Isaac L. Dundas
being (1) M.D. M.R.C.P.Lon.
hereby certify, on soul and conscience, that I have this day, at (2) Ballyveagy
in the County of Antrim, seen and personally examined
James Campbell, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution, Dumfries.
And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Isaac L. Dundas. M.D.

DATED this 25th day of February ~~One thousand nine hundred and~~ 1902

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein James Campbell
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Wife.

Signature and Address Elizabeth Campbell

Date 26th February 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute (1) of ~~the~~ (2) Dumfries and Galloway at Dumfries
having had produced to me, with a Petition at the instance of (3) Mrs Elizabeth Campbell, Ballyveagy, Carnmoney, Co. Antrim, Ireland, Certificates under the hands of Richard James Purdon, and Isaac Chichester Dundas, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Campbell, Ballyveagy, Carnmoney, Co. Antrim, Ireland and that the said James Campbell is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Campbell as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Campbell, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty seventh day of February,
One thousand nine hundred and two years.

To the Superintendent of the (6) Public
Asylum of Crichton Royal Institution,
Dumfries.

(6) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 88444.

James Campbell.

Adm. 26 February 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries & Galloway ~~_____~~ *and his Substitutes,*—at Dumfries.

The Petition of Alex Neil, Leswalt Parish Inspector of Poor & Procurator Fiscal Office.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Susan Duncan McLauchlin your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Susan Duncan McLauchlin to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Alex Neil

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh (4) day of March One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Susan Duncan McLauchlin.
2. Sex and Age,	Female. 25 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	11 Viewpark Avenue. Dennistoun
7. Place where Found and Examined,	Do. Do.
8. Length of time Insane,	One week.
9. Whether First Attack,	No. second.
10. Age (if known) on First Attack,	25 Years.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution from 1st January 1902.
12. Duration of Existing Attack,	One week.
13. Supposed Cause,	Relapse from previous attack.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	—
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Leswalt Parish.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John McLauchlin. (Husband) 11 Viewpark Avenue Dennistoun. Glasgow
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If not previously under observation or treatment, so state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventh day of March One thousand nine hundred and two years.

(To be signed by the party applying) Alex Neil

P p.

T. & A. C.—April 1900.

No 88114

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Carmell being a (1) Licentiate of the Royal College of Physicians Ed and of the Faculty of Physicians & Surgeons G and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 11 Park Avenue, Glasgow, in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (5) Susan Duncan or McLan residing there, pauper, and that the said Susan Duncan or McLauchlan person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is dull, apathetic and foolish in manner and ap and she is quite incoherent in conversati and foolish and delusive in her ideas.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband states that she was very foolish in conduct, and requir constant supervision.

Name and Medical Designation, J. Carmell L.R.C.P.E

Place of Abode, 5 Royal Crescent Gla

DATED this 6th day of March One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Fullen being a (1) M.D. of Glasgow and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 11. Viewpark Avenue, Glasgow in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (5) Susan Duncan or McLauchlan, and that the said Pauper residing there Susan Duncan, or McLauchlan is a (5) Person of Unsound and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has a giggling, silly manner; rapidly alternating with suspicion, and very voluble in Her ideas are quite vague; partly delusive; and has marked defect in Comprehension.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Husb states that he requires to stay at home to watch her, as soon as she starts giggling and dancing in street re

Name and Medical Designation, William Fullen M.D

Place of Abode 9. Grafton Place

DATED this 6th day of March One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Carmll being (1) a Licentiate of the Royal College of Physicians Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) 11 Parkvieu Terrace, Dumfries in the County of Dumfries, seen and personally examined Susan Duncan or McLauchlan, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

(1) State whether Physician or Surgeon.

(2) State place of residence.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

A. Carmell L.R.C.P.Ed.

DATED this 6th day of March One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Dumfries Asylum to receive therein Susan Duncan or McLauchlan to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Removing Officer

Signature and Address Alexander Bisset 46 Nith Place Dumfries

Date 6th March 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (1) Sheriff-Substitute of the Stewartry of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Alex: Mackie, Inspector of Poor, Kirkcudbright, Stranraer, Certificates under the hands of John Carmell and William Gullen being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Susan Duncan or McLauchlin, 11 Parkvieu Terrace, Dumfries, (a pauper) and that the said Susan Duncan or McLauchlin is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Susan Duncan or McLauchlin as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Susan Duncan or McLauchlin which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Eighth day of March One thousand nine hundred and two years.

To the Superintendent of the (6) Public *Asylum of* Crichton Royal Institution Dumfries.

[Signature] Geo. Campion

(6) Public, District, Parochial, or Private.

No 8845.

Susan Duncan McLauchlin
(Leswalt)

Adm. 6th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, ——— *and his Substitutes,—at* Dumfries :

The Petition of Edith Mary Ingham, 3 Heathfield Terrace, Halifax, Yorkshire

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Katharine Isabel Ingham, ———

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) youngest sister, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Katharine Isabel Ingham, ——— to the Crichton Royal Institution, — and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Edith Mary Ingham —

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh — (4) day of March, —— One thousand nine hundred and two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Katharine Isabel Ingham —
2. Sex and Age,	Female, 35 —
3. Married, Single, or Widowed,	Single —
4. Condition of Life, and previous Occupation (if any),	Assisted in home duties —
5. Religious Persuasion, so far as known,	Church of England —
6. Previous Place of Abode,	3. Heathfield Terrace — Halifax;
7. Place where Found and Examined,	3. Heathfield Terrace. Halifax.
8. Length of time Insane,	About 3 weeks —
9. Whether First Attack,	No —
10. Age (if known) on First Attack,	28 —
(5) If last has been only in an Asylum, state date of latest admission thereto. If now under Care or treatment. 11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution Dumfries.
12. Duration of Existing Attack,	About 3 weeks —
13. Supposed Cause,	General debility —
14. Whether subject to Epilepsy,	No —
15. Whether Suicidal,	no —
16. Whether Dangerous to others,	no —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	———
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Harriet Ingham — 3 — Heathfield Terrace. Halifax an elder sister of the patient's —
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	———

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventh day of March, — One thousand nine hundred and two years.

(To be signed by the party applying) Edith Mary Ingham —

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alfred Manville

being a (1) M.D. & Member of the Royal College of Physicians London.

and being in actual practice as a (2) Physician,

do hereby certify, on soul and conscience, that I have this day, at (3) 3 Heathfield

Halifax, in the County of

separately from any other Medical Practitioner, visited and personally examined (4) Katherine Isabel Ingham

and that the said Katherine Isabel Ingham is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

I saw first on March 11th at 9.30 p.m. I found her in a very excited state. She had been missing for several hours. Girl friend had seen her last night and said she had been to a Salvation Army meeting 3 miles away by Cattle's Farm to a clergyman she knew. She said she had committed Unpardonable Sins. She has lived in Halifax all her life. Has been working at Crossley's Carpet Factory. Has had no sleep for 2 nights. Has had no food. Has not washed or changed clothes. Has been very excited. Has had no medicine &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her sister Charlotte Ingham reported to me on the 12th that Katherine Isabel quitted the Shaw Carr Institution and walked in her night clothes and bathing shoes. She was found by a milkman and was going to a clergyman's She said she had committed the Unpardonable Sins. She openly said she feared she would be arrested.

Name and Medical Designation, Alfred Manville M.D. Lon. M.R.C.P.

Place of Abode, Sandal Place Halifax

DATED this 12th day of March One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Edward Ellis

being a (1) L.R.C.P. Edin. & L.R.C.S. Edin.

and being in actual practice as a (2) Physician & Surgeon,

do hereby certify, on soul and conscience, that I have this day, at (3) 3 Heathfield

Halifax, in the County of

separately from any other Medical Practitioner, visited and personally examined (4) Katherine Isabel Ingham

and that the said Katherine Isabel Ingham is a (5) person of unsound Mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

She told me she has said wrong things about people & myself included. She feels she cannot be forgiven for Sins but the other night she had a Vision from Heaven which told her to be happy and that she must keep close to Jesus in her right mind to the nearest Church which she did.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Charlotte Ingham Sister to Katherine Isabel tells me She refuses food because people are trying to poison her. Also goes about with her eyes closed. Constantly repeating Scripture and asking people to pray with her.

Name and Medical Designation, Edw. Ellis

Place of Abode, 126 Gibbet St. Halifax.

DATED this 12th day of March One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Asylum to receive therein to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk — (1) Honorary Sheriff-Substitute of (2) ~~the~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) Edith Mary Ingham, 3 Heathfield Lydea, Halifax, Yorkshire, Certificates under the hands of Alfred Mantle, — and Edward Ellis, — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Katharine Isabel Ingham, 3 Heathfield Lydea Halifax Yorkshire (Spinster) and that the said Katharine Isabel Ingham, is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Katharine Isabel Ingham as a patient into the (6) Public — Asylum of Crichton Royal Institution, Dmfs and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Katharine Isabel Ingham which accompanied the said Petition.

DATED [at Dumfries -] this Seventh day of March, One thousand nine hundred and two years. - Oneword deleted. -

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

To the Superintendent of the (6) Public
Asylum of Crichton Royal Institution, Dumfries. -

[Signature] John Clerk

(6) Public, District, Parochial, or Private.

No. 8846.

Katharine Isabel Ingham

Adm: 4th March 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of Dumfries and Galloway and his Substitutes,—at Dumfries.

The Petition of James Menzies Austin, Inspector of Poor, Dalbeattie.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Campbell, Townhead of Torkatrine,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Campbell, to the Crichton Royal Asylum, Dumfries and to sanction her admission into the said Asylum

(*To be signed by the Party applying*) J. M. Austin.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 24th (4) day of March, One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jane Campbell.
2. Sex and Age,	Female - 72 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Domestic Servant.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Townhead of Torkatrine.
7. Place where Found and Examined,	do.
8. Length of time Insane,	about 6 years affected.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	/
11. When and where previously under Examination and Treatment (5)	Not previously under treatment.
12. Duration of Existing Attack,	about 6 years.
13. Supposed Cause,	Loss of her means.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Urr.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Sister Mrs Martin, Townhead of Torkatrine by Dalbeattie. no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	/ —

(5) If patient has previously in an asylum, state as exactly as possible the date of latest admission or approximate thereto. If not previously under treatment or treatment unknown, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 24th day of March, One thousand ~~eight~~ nine hundred and two.

(*To be signed by the party applying*) J. M. Austin.

T. & A. C.—Oct. 1898. P. T.

MEDICAL CERTIFICATE, No 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert McVeochan ——— being a (1) Graduate of Edinburgh University, ——— and being in actual practice as a (2) General Practitioner ——— do hereby certify, on soul and conscience, that I have this day, at (3) Townhead of Torkatrine, ——— in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Jane Campbell - (a Pauper) ——— and that the said Jane Campbell, ——— is a (5) Person of Unsound mind ——— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her memory of past events is almost a blank. She confuses her degree of relationship of her Nieces who live in the home along with her.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Sister, Mrs Chrystie, informs me that for Six Years she has begun attention becomes frontal weakness, & that latterly she has become untidy in her habits, like she is rising & keeps out at night.

Name and Medical Designation, Robt McVeochan

Place of Abode, Dalbeattie

DATED this 21st — day of March, — One thousand ~~eight~~ nine hundred and and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Archd David Gillespie, ——— being a (1) Bach. of Med. & Master in Surgery. (Univ Edin) ——— and being in actual practice as a (2) General Practitioner ——— do hereby certify, on soul and conscience, that I have this day, at (3) Townhead of Torkatrine, ——— in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Jane Campbell. Pauper, ——— and that the said Jane Campbell, ——— is a (5) person of unsound mind, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has delusion. Has no memory. Can't answer questions intelligently.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her sister Helen Campbell says she wont sleep at night due to supposed persons talking to her. During the day has periods of excitement and cant be controlled.

Name and Medical Designation, S. A. D. Gillespie M.B.Ch.

Place of Abode Alma Dalbeattie

DATED this sixth — day of March, — One thousand ~~eight~~ nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Jas. Archd. David Gillespie — being (1) Bach. of Med. & Master in Surg. of the Univ. of Edin. hereby certify, on soul and conscience, that I have this day, at (2) D. of Portobello in the County of Kirkcudbright —, seen and personally examined Jane Campbell —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

Jas. D. Gillespie

DATED this sixth day of March, One thousand eight nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Jane Campbell — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address J. M. Austin. Dalbeattie

Date 6 March 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the (1) Dumfries & Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) James Menzies Austin, Inspector of Poor, Dalbeattie, — Certificates under the hands of Robert McKerchar — and Samuel Archd. David Gillespie — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Jane Campbell, Townhead of Terbattern, Dalbeattie (a pauper), and that the said Jane Campbell is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Campbell, as a Patient into the (5) Public Asylum of Crichton Royal Institution, and I authorize you to make Transmission to the said Asylum accordingly, and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Campbell, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Tenth — day of March, — One thousand ~~eight hundred and~~ nine hundred and two years. Four words deleted.

To the Superintendent of the (5) Public. *Asylum of* Crichton Royal Institution, Dumfries.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

No. 8844.

Jane Campbell.

(Llff)

Adm: 8th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries & Galloway, *and his Substitutes,—at* Dumfries:

The Petition of John C. Rankine, Bank Clerk, 30 St. Vincent Place, Glasgow:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs. Minnie Rankine McLubbin, your Petitioner's (3) Sister, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Minnie Rankine McLubbin, to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John C. Rankine

DATED this Eleventh (4) day of March,—One thousand nine hundred and two years.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Minnie Rankine McLubbin.
2. Sex and Age,	Female. 44.
3. Married, Single, or Widowed,	Widow.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Cassillis Road, Maybole.
7. Place where Found and Examined,	Do. Do., & Dumfries.
8. Length of time Insane,	1 week.
9. Whether First Attack,	3rd attack.
10. Age (if known) on First Attack,	24.
11. When and where previously under Examination and Treatment (2)	Crichton Institution, Dumfries.
12. Duration of Existing Attack,	one week.
13. Supposed Cause,	None.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Rankine, Auchlands Street, Maybole. — brother —
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(2) If patient has been previously in an Asylum, state name and date of latest admission or application thereto. If previously under Examination or Treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this tenth day of March, One thousand nine hundred and two years.

(To be signed by the party applying) John C. Rankine

T. & A. C.—Nov. 1898.

P p

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Hugh Gurvan, being a (1) Doctor of Medicine, (Glasgow University) and being in actual practice as a (2) Physician and Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) Cassillis Road, Maybole, in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Minnie Rankine McCubbin, Cassillis Rd, Maybole and that the said Minnie Rankine McCubbin is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Restless excited & talking incoherently, at times jumping out of bed, and screaming. Refusing take her meals. and at times shelter at attend

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her daughter tells me that on Sunday morning last (9th M she jumped into her bed and tried to strangle her a her sisters, and several times during the day she su attacked

Name and Medical Designation, Hugh Gurvan M.D.

Place of Abode, Maybole

DATED this tenth day of March One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Thomson being a (1) Doctor of medicine of Glasgow University and Surgeon and being in actual practice as a (2) Physician and Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Minnie Rankine McCubbin, Widow, Cassilis Rd, Maybole, Ayrshire, and that the said Minnie Rankine McCubbin is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is in a nervous and excited state: says she cannot sleep, and has a dread of something being about to happen to her, over which she has no control: talks incoherently about these things.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode 27 Castle Street, Dumfries

DATED this Eleventh day of March, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hugh Girvan, M.D. being (1) a Doctor of Medicine of Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Maybole, in the County of Ayr, seen and personally examined Minnie Rankine McCubbin, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Hugh Girvan M.D.

DATED this Tenth day of March, — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Minnie Rankine McCubbin, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address John A. Rankine

Date 10th March 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire Advocate, Sheriff Substitute — of the (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) John Rankine, Bank Teller, 20 St. Vincent Place, Glasgow, Certificates under the hands of Hugh Girvan, and Alexander Thomson, — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Minnie Rankine McCubbin, Wallis Road, Maybole, and that the said Mrs Minnie Rankine McCubbin, is (5) a person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Minnie Rankine McCubbin as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize you to do Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Minnie Rankine McCubbin which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twelfth — day of March, — One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

No. 8848.

Minnie Rankine McCubbin

Adm: 10th March 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff —— of ~~the (2) ——~~ of Dumfries and Galloway, and his Substitutes—The Petition of Miss Eliza Head Dalgliesh Fisher residing at No 3 Lumbyland Terrace, Annan,—

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Jane Armstrong, Bonnville Annan, your Petitioner's (3) Cousin, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Jane Armstrong, to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Eliza H. D. Fisher

(4) The date of the Petition must be within fourteen clear days ~~eight~~ following the dates of the Medical Certificates.

DATED this Twelfth — (4) day of March, —— One thousand nine hundred and two. — One printed word deleted. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Jane Armstrong.
2. Sex and Age,	Female - About 50 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Living on her own means. - Formerly Proprietrix of a Private School in Preston, Lancashire.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Scotts' Street, Annan.
7. Place where Found and Examined,	Bonnville, Annan.
8. Length of time Insane,	About six years.
9. Whether First Attack,	For many years she has shown symptoms of mental derangement but these symptoms did not become acute until about six years ago and since then she has become worse.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	No previous examination or treatment.
12. Duration of Existing Attack,	See answers to Nos 8, 9 and 10 supra.
13. Supposed Cause,	Cause not known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Not known but her Medical adviser considers it unsafe for her to remain at home without a proper Attendant or Keeper.
16. Whether Dangerous to others,	Not known.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	✓
18. Date of becoming Chargeable,	✓
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Adam Dickson, No 37 Great Avenham Street Preston, Lancashire. Uncle - No member of her family known to have been insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of March, One thousand nine hundred and two. — One printed word deleted. —

(*To be signed by the party applying*) Eliza H. D. Fisher.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Lindsay Howie. a Bachelor of Medicine (1) and Master in Surgery of Glasgow University

and being in actual practice as a (2) Physician & Surgeon,

do hereby certify, on soul and conscience, that I have this day, at (3) Brownville, Annan, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Jane Armstrong, Brownville, Annan, and that the said Mary Jane Armstrong, is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
She is very excitable in her manner, lives in constant dread of imaginary people entering the house, hears them engaged at work in upper rooms. –

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr. C. Watson solicitor, Annan has of late been receiving constant communications regarding the aforesaid state of matters.

Name and Medical Designation, J. L. Howie M.B. & Ch.M.

Place of Abode, Edinam House, Annan

DATED this twelfth day of March, One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE. No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, William Murdoch, being a (1) Doctor of Medicine of Edinburgh University,

and being in actual practice as a (2) physician surgeon,

do hereby certify, on soul and conscience, that I have this day, at (3) Brownville, Annan, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Jane Armstrong, Brownville, Annan, and that the said Mary Jane Armstrong, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her manner & conversation indicate abnormal excitement – She has delusions e.g. that men enter her house through the flues & commit nuisance & annoy her constantly in this & other ways. She has hallucinations of hearing – hearing voices & other noises constantly. Are being persistent.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her relative Miss E. H. J. Fisher corroborates above says this has been going on for some years but has been getting more marked of late.

Name and Medical Designation, Wm. Murdoch, M. D. (Edin.)

Place of Abode 16 St. John's Road, Annan.

DATED this twelfth day of March, One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Lindsay Howie
being (1) ~~M.B. & Edin.~~ M. of Glasgow University,
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries,
in the County of Dumfries, seen and personally examined
Mary Jane Armstrong, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum. And I further certify that the case of the said person is one of Emergency.
is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

J. L. Howie M.B.Edin.

(1) State medical qualification.
(2) State place of examination.

DATED this ~~twenty~~ fifth day of March, One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution,
Asylum to receive therein Mary Jane Armstrong
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Cousin

Signature and Address Eliza H. D. Fisher, 3 Cumberland Ter Annan.

Date 13th March 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire Advocate, Sheriff Substitute,
of the (3) Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (4) Miss Eliza H. D. Fisher, 3 Cumberland Terrace, Annan,
Certificates under the hands of John Lindsay Howie,
and William Murdoch, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Mary Jane Armstrong, Strand Place, Annan (Dumfries) and that the said Mary Jane Armstrong is a (6) person of unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Jane Armstrong as a Patient into the (7) Public Asylum of Crichton Royal Institution and I authorize you to receive Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Jane Armstrong, which accompanied the said Petition.

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(5) Describe him, and if a Pauper, state so.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, Parochial, or Private.

DATED this Thirteenth day of March, One thousand ~~eight~~ nine hundred and two years.

Geo. Campion

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution
Dumfries.

(7) Public, District, Parochial, or Private.

No. 8849.

Mary Jane Armstrong

Aden. 12th March 1902.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[Form **A**]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that George Andrew Aitken your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Andrew Aitken to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) Miles Mc Innes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirteenth (*) day of March One thousand ~~eight~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	George A. Aitken
2. Sex and age,	Male - 28
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	19 Balmoral Road
7. Place where found and examined,	
8. Length of time Insane,	All his life known or less
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	~~the~~ Crichton Royal Asylum about 8 years ago
12. Duration of Existing Attack,	Epilepsy
13. Supposed Cause,	yes
14. Whether Subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Dumfries
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	12th March 1902
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mary Watson or Aitken, Mother, 19 Balmoral Road, Dumfries
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	No

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of March One thousand nine ~~eight~~ hundred and Two years

(To be signed by the party applying) Miles Mc Innes

SC 8870

MEDICAL CERTIFICATE, NO. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

I, the undersigned, Peter Murray Kerr M.B. C.M.
being a (1) Bachelor of Medicine & Master in Surgery of the University of Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on Soul and Conscience, that I have this day, at (3) 14 Balmoral Road Dumfries in the County of Dumfries separately from any other Medical practitioner, visited and personally examined (4) George Andrew Aitken, pauper 14 Balmoral Road Dumfries and that the said George Andrew Aitken is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane appearance and manner
He is an epileptic.
& stupid and dull.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
William Aitken his brother, informs me that he at times uncontrollable. When he is violent and dangerous.

Name and Medical Designation, Peter Murray Kerr MB
Place of Abode, 20 Castle Street Dumfries

DATED this Twelfth day of March One thousand ~~eight~~ nine hundred and two years

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MEDICAL CERTIFICATE, NO. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

I, the undersigned, George Robert Livingston
being a (1) Bachelor of Medicine and Master in Surgery
& Edinburgh University
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on Soul and Conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) George Andrew Aitken pauper Crichton Royal Institution and that the said George Andrew Aitken is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane appearance and manner
He is an Epileptic
& stupid answering questions incoher

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, George R. Livingston
Place of Abode, 35 George Street Dumfries

DATED this thirteenth day of March One thousand ~~eight~~ nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr.
being (1) a Graduate of Medicine
hereby certify, on Soul and Conscience, that I have this day, at (2) 19 Balmoral Road Dumfries
in the County of Dumfries, seen and personally examined George Andrew Aitken, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum. *

(1) State Medical qualification.
(2) State place of Examination.

And I further certify that the case of the said person is one of Emergency.
* and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr

Dated this twelfth day of March One thousand ~~nine~~ hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein George A. Aitken
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address, Miles Mc Jones, 28 Dum Pl

Date, 12th March 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion — Sheriff Substitute of ~~the County of~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Miles Mc Jones Inspector of Poor Dumfries, Certificates under the hands of Peter Murray Kerr and George Albert Livingston being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) George Andrew Aitken, 19 Balmoral Road, Dumfries (a pauper) and that the said George Andrew Aitken is a (3) Person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Andrew Aitken as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize his Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said George Andrew Aitken which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

Dated this Fifteenth day of March One thousand ~~eight hundred and~~ nine hundred and two years.

Inserted words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8850

Name George Andrew Aitken
(Dumfries)

Date of Admission 18th March 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of Dumfries and Galloway — *and his Substitutes,* — of Dumfries:

The Petition of John Laurie, Inspector of Poor for the Parish of Annan.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Barbara McArthur, Irvingbank, Annan, your Petitioner's (2) Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Barbara McArthur, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John Laurie

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twelfth — (3) day of February — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Barbara McArthur.
2. Sex and Age,	Sex female. Age 46.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Formerly Lighthouse Keeper.
5. Religious Persuasion, so far as known,	Baptist.
6. Previous Place of Abode,	Irvingbank, Annan.
7. Place where Found and Examined,	Do. Do.
8. Length of time Insane,	About one week.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	45
11. When and where previously under Examination and Treatment (5)	August 1901 to 12th Oct. 1901. in Crichton Royal Institution.
12. Duration of Existing Attack,	About one week.
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Doubtful.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William McArthur, illegitimate son. Irvingbank, Annan. No member of family known to have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If Lunatic has previously in an Asylum, state date of latest admission or appointment to. If previously under Medical or treatment elsewhere state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of March, One thousand nine hundred and two years.

(To be signed by the party applying) John Laurie

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Rolston Brown,
being a (1) Physician & Surgeon, Graduate of the University of Glasgow
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Irving's
Bank Annan, in the County of Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Barbara McArthur,
Pauper, Barbara McArthur, and that
the said Barbara McArthur, is a (5) Lunatic
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Most strange in her manner. walks backwards with her eyes shut and thinks she can shape doors and seeing strange objects.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs McKenzie, and Mrs Deming notices her strange in her manner walks about wringing her hands

Name and Medical Designation, John Rolston Brown
Place of Abode, Nicholson Annan

DATED this twelfth day of March One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Lindsay Howie,
being a (1) Bachelor of Medicine & Master in Surgery, Glasgow University
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) Irving's
Bank Annan, in the County of Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Barbara McArthur,
Pauper wife, Irving's Bank, Annan, a pauper, and that
the said Barbara McArthur, is a (5) person of
unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is wild and excited, paces up & down her house, says she is under treatment by an imaginary Dr. O'Brien, who treatment she is carrying out by marching up & down an outside stair

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her neighbour Mrs McKenzie states that for some time back her manner has been very peculiar & saw her march up & down outside stair for 2 hours on the night alone

Name and Medical Designation, J. L. Howie. M.B.C.M.
Place of Abode, Edward Ho. Annan.

DATED this twelfth day of March, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Lindsay Howie — being (1) a M.B. & C.M. of Glasgow University, hereby certify, on soul and conscience, that I have this day, at (2) Annan, in the County of Dumfries —, seen and personally examined Barbara McArthur —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

J. L. Howie M.B. & C.M.

DATED this twelfth day of March — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Barbara McArthur, — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Inspector of Poor

Signature and Address Whitehaugh Annan

Date 12th March 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson Esquire Advocate (1) Sheriff Substitute — of the (2) Dumfries and Galloway at Dumfries — having had produced to me, with a Petition at the instance of (3) John Lawie, Inspector of Poor, Annan, — Certificates under the hands of John Pitkethly — and John Lindsay Howie — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Barbara McArthur, Irvingbank, Annan, a pauper, and that the said Barbara McArthur, is a (5) person of unsound mind, a lunatic, — and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Barbara McArthur as a Patient into the (6) Public — Asylum of Crichton Royal Institution, and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Barbara McArthur, — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or as Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this ~~fourteenth~~ twelfth day of March, One thousand nine hundred and two years.

To the Superintendent of the (7) Public. — *Asylum of* Crichton Royal Institution, at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo Lampson

No. 8851.

Barbara McArthur.
(Annan)
Adm: 12th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) County~~ of Dumfries & Galloway, *and his Substitutes,*— at Dumfries.

The Petition of James Halliday

Laghead Gatehouse

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Halliday Laghead Gatehouse,

(1) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (1) father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Halliday to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) James Halliday

(1) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twelfth — (1) day of March — One thousand nine ~~eight~~ hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Robert Halliday
2. Sex and Age,	male, age 47 years
3. Married, Single, or Widowed,	widower
4. Condition of Life, and previous Occupation (if any),	farmer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Laghead
7. Place where Found and Examined,	Laghead
8. Length of time Insane,	six weeks
9. Whether First Attack,	first attack
10. Age (if known) on First Attack,	47 years
11. When and where previously under Examination and Treatment (1)	—
12. Duration of Existing Attack,	5 weeks
13. Supposed Cause,	melancholia
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Halliday (Son) Laghead
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(1) If patient has previously in an Asylum, state name of latest Asylum or approximate thereto. If previously under Asylum or treatment, the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twelfth — day of March — One thousand nine ~~eight~~ hundred and two

(*To be signed by the party applying*) James Halliday.

T. & A. C.—May 1898.

P.T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Dott
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Laghead
Thirlendright in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Robert Halliday, Laghead, Gatehouse
and that
the said Robert Halliday is a (5) Person
of unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Inability to hold any rational conversation
Manner & conduct all totally at variance with
usual habits. Declares that is poisoned by Bro
Refuses to take any nourishment as he says
a dying man which is not the case

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Not
his Son & daughter say that he was
high. Calls out - That he declares
poisoned - & he has refused his food

Name and Medical Designation, Alexander Dott M
Place of Abode, Gatehouse of Fle

DATED this Twelfth day of March One thousand eight hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, James Nichol Cox
being a (1) Licentiate of the Royal College of Surgeons Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Laghead
Thirlendright in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Robert Halliday, Laghead,
and that
the said Robert Halliday is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
He is rambling & incoherent in his speech, very excited in
his manner. Believes he has been poisoned by Minche
That his bowels & muscles are all permeated with ap-
some other delusions

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
He shouts & sings out at the pitch of his voice
& will not eat meat

Name and Medical Designation, James Nichol Cox L.R.C.S.E
Place of Abode Gatehouse

DATED this Twelfth day of March One thousand eight hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Dott being (1) a graduate of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Laghead in the County of Kirkcudbright, seen and personally examined Robert Halliday, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

Alexander Dott M.B. CM.

DATED this 12th day of March One thousand ~~eight~~ nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the ~~Dichton Royal~~ Southern Counties Asylum to receive therein Robert Halliday to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Son

Signature and Address James Halliday,

Date 13th March 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire, Advocate, (1) Sheriff Substitute of ~~the~~ (2) Dumfries & Galloway at ~~of~~ Dumfries having had produced to me, with a Petition at the instance of (3) James Halliday Laghead, Kirkton, Gatehouse, Certificates under the hands of Alexander Dott and James Nichol both being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert Halliday, Laghead, Kirkton, Gatehouse, Kirkcudbright and that the said Robert Halliday is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Halliday as a Patient into the (6) Public Asylum of Southern Counties and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Halliday which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourteenth day of March One thousand ~~eight~~ hundred and two years. Three printed words deleted.

To the Superintendent of the (7) Public *Asylum of* Southern Counties at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8852.

Robert Halliday

Adm: 13th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries of Galloway, — *and his Substitutes,*— at Dumfries:

The Petition of E. S. Hall, 53 Dundonald Road, Kilmarnock:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Francis Russell Hall, your Petitioner's (3) Brother, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Francis Russell Hall, — to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) E. S. Hall

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventeenth (4) day of March, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Francis Russell Hall.
2. Sex and Age,	Male- 36.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Gentleman.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Thornhill, Cambridge.
7. Place where Found and Examined,	53 Dundonald Road, Kilmarnock
8. Length of time Insane,	Six months,
9. Whether First Attack,	Yes,
10. Age (if known) on First Attack,	36,
11. When and where previously under Examination and Treatment (5)	✓
12. Duration of Existing Attack,	✓
13. Supposed Cause,	Alcohol
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Threatened,
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	✓
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	E. S. Hall, 53 Dundonald Road Kilmarnock. (Brother) None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

(5) If patient has previously in an Asylum, state date of latest admission or application thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fifteenth day of March, — One thousand nine hundred and two years.

(To be signed by the party applying) E. S. Hall

T. & A. C.—Sept. 1900.

P 9.

MEDICAL CERTIFICATE, No I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
(3) *Insert the street, and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, or an insane person, *or* an idiot, or a person of unsound mind.
(6) *State the facts.*
(7) *State the information, and from whom derived.*

I, the undersigned, John Robertson M.B.C.M.
being a (1) Graduate of Glasgow University, —
and being in actual practice as a (2) Physician, —
do hereby certify, on soul and conscience, that I have this day, at (3) 53 Dundonald Rd, Kilmarnock, — in the County of Ayr, separately from any other Medical Practitioner, visited and personally examined (4) Francis Russell Hall 53 Dundonald Rd Kilmarnock and that the said Francis Russell Hall is a (5) Person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Hears noises imaginary - Thinks that his friends are conspiring against him. -

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sleepless - Violent at times - attacked his attendant. - Threatened to do for himself.
his brother Edward Hall. -

Name and Medical Designation, John Robertson M
Place of Abode, Holmhead - Kilmarnock
Dated this 14th day of March, - One thousand nine hundred & two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) *State the facts.*
(7) *State the information and from whom derived.*

I, the undersigned, John Lawrie, M.B.C.M. —
being a (1) Graduate of Edinburgh University, —
and being in actual practice as a (2) Physician, —
do hereby certify, on soul and conscience, that I have this day, at (3) 53 Dundonald Rd Kilmarnock — in the County of Ayr, separately from any other Medical Practitioner, visited and personally examined (4) Francis Russell Hall, of Thorndale Richmond Road Dunstable, — and that the said Francis Russell Hall, — is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Cannot carry on connected conversation - suddenly stops, & looks as if hearing some sound. Imagines that people passing in the street are in conspiration of friends in the house - He hears sounds on the roof of the house, thinks it is a plot his friends against him.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His sister-in-law accuses his wife of making up to her attendant - upon at times to eat - threatening to kill himself. Began his pen-knife was taken from him, cut marks on his wrists

Name and Medical Designation, John Lawrie M.B.C.M.
Place of Abode Kilmarnock
Dated this 14th day of March, — One thousand nine hundred & two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Robertson
being (1) M.B.C.M. Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) Kilmarnock
in the County of Ayr, seen and personally examined Francis Russell Hall, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

John Robertson

DATED this 14th day of March, — One thousand nine hundred & two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Francis Russell Hall, — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address E. S. Hall 53 Dundonald Rd. Kilmarnock

Date 15th March 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the (1) Dumfries & Galloway at Dumfries — having had produced to me, with a Petition at the instance of (2) E. S. Hall, 53 Dundonald Road Kilmarnock, Certificates under the hands of John Robertson and John Laurie, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Francis Russell Hall, 53 Dundonald Road Kilmarnock, Ayrshire, and that the said Francis Russell Hall, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Francis Russell Hall, — as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Francis Russell Hall, — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Eighteenth day of March One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (7) Asylum of Crichton Public — Royal Institution, at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8853.

Francis Russell Hall.

Adm: 15th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (1) Dumfries & Galloway, — *and his Substitutes,* — at Dumfries:

The Petition of Youngs R. Green — Springfield Villas, Bangor, Co. Down, Ireland:-

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Jane Patterson, ~~Son-in-Law~~ Mother in Law, U.K.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Jane Patterson, — to the ~~Dumfries~~ Belfast Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Youngs R. Green

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Nineteenth (3) day of March, — One thousand nine hundred and two years. -

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Ann Jane Patterson.
2. Sex and Age,	Female. 59 years.
3. Married, Single, or Widowed,	widow.
4. Condition of Life, and previous Occupation (if any),	none.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	6 Holywood Villas, Upper Knock Rd, Belfast.
7. Place where Found and Examined,	Bangor.
8. Length of time Insane,	Four weeks.
9. Whether First Attack,	Second attack.
10. Age (if known) on First Attack,	about 43 years.
11. When and where previously under Examination and Treatment (5)	Belfast. Six weeks.
12. Duration of Existing Attack,	Trouble & worried
13. Supposed Cause,	no.
14. Whether subject to Epilepsy,	Tendency, no.
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Youngs R. Green. Springfield Villas, Bangor, Co. Down. Son-in-Law ~~Dumfries~~ none, -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an asylum, state name of latest asylum or private residence. If previously under medical or treatment elsewhere.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Nineteenth day of March, — One thousand nine hundred and two years.

(To be signed by the party applying) Youngs R. Green

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, C. K. Darnell
being a (1) Licentiate of Royal College of Physicians & Surgeons in Edinburgh,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 2 Springfield Villas, Bangor Co. Down, in the County
separately from any other Medical Practitioner visited and personally examined (4) Ann Jane Patterson, of 6 Hollywood View Terrace, Shore Road, Belfast and that the said Ann Jane Patterson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Melancholic (extreme.) with attacks of mental excitement, during which I have seen patient with hands have required to be tied, endeavour to injure herself, and ... unmanageable.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Information derived from Son-in-law Younge R. Green as to a previous attack of like nature.

Name and Medical Designation, C. K. Darnell L.R.C.P. & S.
Place of Abode, Bangor Co. Down

DATED this 13th day of March, — One thousand nine hundred and 21 (two).

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, H. L. McKisack
being a (1) Doctor of Medicine in the Royal University of Ireland,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 2 Springfield Villas, Bangor, ~~Co Down~~ in the County of Down, — separately from any other Medical Practitioner visited and personally examined (4) Ann Jane Patterson of 6 Hollywood View Terrace Shore Road, Belfast, and that the said Ann Jane Patterson — is a (5) person of unsound mind, — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Great mental depression & melancholy & threatened to injure herself.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her daughter informs me she has had 2 former periods of excitement & threatened suicide.

Name and Medical Designation, H. L. McKisack M.
Place of Abode, 15 College Square East Be
DATED at Bangor ~~day of~~ 14th day of March, One thousand nine hundred and two. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, C. K. Darnell, being (1) L.R.C.P. Licentiate of Royal Colleges of Physicians & Surgeons of Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) 2 Springfield, Bangor, in the County of Down, seen and personally examined Ann Jane Patterson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

C. K. Darnell

DATED this 14th day of March, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Ann Jane Patterson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Son in Law.

Signature and Address Young & Green, 2 Springfield Villas, Bangor

Date 19th March, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (1) Sheriff-Substitute of the ~~County~~ Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of Young & Green, 2 Springfield Villas, Bangor, Co: Down, Ireland (2), Certificates under the hands of C. K. Darnell, and A. L. M'Crack, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Ann Jane Patterson, Holywood, New Town, Shore Road, Belfast, Ulster Hotel, and that the said Ann Jane Patterson, is a (4) Person of unsound mind, and a proper Person to be, detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Jane Patterson as a patient into the (5) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Jane Patterson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry. Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twentieth day of March, One thousand nine hundred and two years.

George Campion

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution

(5) Public, District, Parochial, or Private.

[Signature] Dumfries.

No. 8854.

Anne Jane Patterson.

Adm: 19 March 1902.

S.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Roxburgh *and his Substitutes,—*

The Petition of Robert Milligan Auctioneer, Hawick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs. Grace Milligan your Petitioner's (3) Wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs. Grace Milligan to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) J. Milligan

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twentieth (4) day of March One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mrs Grace Milligan
2. Sex and Age,	Female 33 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Housewife
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	4 Roxburgh Cottage Hawick
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	One week
9. Whether First Attack,	1st Attack
10. Age (if known) on First Attack,	33 years
11. When and where previously under Examination and Treatment (5)	Not under treatment
12. Duration of Existing Attack,	"
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	May be
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	"
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Milligan auctioneer Hawick (Husband) None to Knowledge
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or approximate date. If previously under treatment or treatment unsatisfactory.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twentieth day of March One thousand nine hundred and two years.

(To be signed by the party applying) J. Milligan

A. & A. C.—Jan. 1900. Pp

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Boydon being a (1) Doctor of Medicine & Surgeon and being in actual practice as a (2) General Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Rosevale Cottages Hawick in the County of Roxburgh separately from any other Medical Practitioner, visited and personally examined (4) Grace Milligan and that the said Grace Milligan is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her mind is quite unhinged, she has many delusions, is very excited, and is constantly talking incoherently

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr. Robert Milligan her husband says she imagines she is being injured, and is perfectly unreasonable

Name and Medical Designation, James Boydon M.D.

Place of Abode, The Sandbed Hawick

DATED this twentieth day of March One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Turnbull Baird being a (1) Bachelor of Medicine & Master in Surgery and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) Munderhow Rosevale Cottages. Hawick in the County of Roxburgh separately from any other Medical Practitioner, visited and personally examined (4) Grace Milligan and that the said Grace Milligan is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is very excited, talks rather incoherently - & has delusions. Says that her baby aged 9 months was insane and that her husband has been very cruel to her

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her husband states that without any ~~Degree~~ provocation she has threatened to kill him. She is very difficult to manage when an attempt is made to control her movements

Name and Medical Designation, Wm Turnbull Baird M.B.C.M.

Place of Abode Hawick

DATED this twentieth day of March One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Brydon being (1) Doctor of Medicine and Surgeon hereby certify, on soul and conscience, that I have this day, at (2) Hawick Cottage Hawick in the County of Roxburgh, seen and personally examined Grace Milligan, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

James Brydon

DATED this twentieth day of March One thousand nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Mrs Grace Milligan to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, _____

Signature and Address _____

Date _____

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Malcolm McColl (1) Sheriff Substitute of the (2) County of Roxburgh having had produced to me, with a Petition at the instance of (3) Robert Milligan Auctioneer Hawick Certificates under the hands of James Brydon M.D. and William Turnbull Barrie being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Grace Milligan and that the said Grace Milligan is a (5) Insane Person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Grace Milligan as a patient into the (6) Crichton Asylum of Dumfries and I authorize Res Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Grace Milligan which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Hawick] this 20th day of March 1902 One thousand nine hundred

To the Superintendent of the (7) *Asylum of* Crichton Dumfries

(7) Public, District, Parochial, or Private.

[Signature] Malcolm McColl SS

No. 8855.

Mrs. Grace Milligan.

Adm: 21 March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,—at* Dumfries:

The Petition of William Beattie, 14 Spencer Street, Carlisle;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Robinson,

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Father-in-Law, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Robinson, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) William Beattie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 24th (4) day of March, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Robinson.
2. Sex and Age,	Male. 63 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	good middle class. Merchant.
5. Religious Persuasion, so far as known,	Congregationalist.
6. Previous Place of Abode,	4 Cavendish Place, Carlisle.
7. Place where Found and Examined,	at Home Carlisle.
8. Length of time Insane,	7 days.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	62 years.
11. When and where previously under Examination and Treatment (5)	13 Dec. 1901. Crichton Institution Dumfries.
12. Duration of Existing Attack,	7 days.
13. Supposed Cause,	Influenza.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Beattie, 17 Spencer St, Carlisle — Son-in-Law. — none.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an asylum, state name of latest asylum, and approximate dates. If previously under treatment for mental disorder, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 25th day of March, One thousand nine hundred and two years.

(To be signed by the party applying) William Beattie

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Philip Ainslie, being a (1) Doctor of Medicine of the University of Edinburgh and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) 4 Carnarvon Place, City of Carlisle, in the County of Cumberland, separately from any other Medical Practitioner, visited and personally examined (4) James Robinson, Merchant 4 Carnarvon Pl. Carlisle, and that the said James Robinson is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Continually talks in an excited manner about all kinds of business is very restless telling his family to be quiet that he is master of this house will do business with every body he sees or meets

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Robinson (his wife says) White purist is going market buying Produce for which they have no Sale giving cheques to various people for no purpose, wants to Sell his property & has had to cancel bills with various p

Name and Medical Designation, Philip Ainslie

Place of Abode, 5 The Crescent Carlisle

Dated this 25th day of March, one thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of Glasgow University and Surgeon and being in actual practice as a (2) Physician and Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) James Robinson, Merchant, 4 Cavendish Place, Carlisle, and that the said James Robinson is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks on Continuously in a rambling and incoherent manner about his business and other affairs.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.

Place of Abode, 27 Carlyle Street, Dumfries

Dated this Twenty seventh day of March, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Philip Hair being (1) Doctor of Medicine of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) 4 Cavendish Place Carlisle in the County of Cumberland, seen and personally examined William Robinson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State condition or qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Philip Hair

DATED this 25th day of March, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein James Robinson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Son-in-Law

Signature and Address Wm. Beattie

Date 26th March, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire Advocate, Sheriff Substitute of the (4) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (5) William Beattie, 17 Spencer Street Carlisle Certificates under the hands of Philip Hair and Alexander Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) James Robinson, 4 Cavendish Place, Carlisle (Son's father-in-law) and that the said James Robinson is a (7) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said James Robinson, as a patient into the (8) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Robinson, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(8) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twenty seventh day of March, One thousand nine hundred and two years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution Dumfries.

(8) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8856.

James Robinson.

Adm: 25th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries — of Galloway, — *and his Substitutes,*— at Dumfries;

The Petition of James Hannah, Cairnsmore, Palnure, Galloway;

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Elizabeth Hannah, — your Petitioner's (3) Daughter, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Annie Elizabeth Hannah, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) James Hannah

DATED this twenty fifth (4) day of March — One thousand nine hundred and two years.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Annie Elizabeth Hannah.
2. Sex and Age,	Feminine. Age 25.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	No occupation.
5. Religious Persuasion, so far as known,	Prodestant.
6. Previous Place of Abode,	Cairnsmore Gardens, Palnure.
7. Place where Found and Examined,	Cairnsmore Gardens, Palnure. ~~and not Dumfries~~
8. Length of time Insane,	6. Months.
9. Whether First Attack,	3rd Attack.
10. Age (if known) on First Attack,	18.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution. 1894 to 1899
12. Duration of Existing Attack,	6 months.
13. Supposed Cause,	No Cause.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Hannah. Father. Cairnsmore Gardens Newton Stewart. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If Patient has previously in an Asylum, state name of latest Asylum, and date of latest admission thereto. If previously under Medical or treatment.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty fifth day of March, — One thousand nine hundred and two years.

(To be signed by the party applying) James Hannah

P. P.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Norman James McVie, ——— being a (1) Doctor of Medicine of the University of Edi and being in actual practice as a (2) Doctor of Medicine, ——— do hereby certify, on soul and conscience, that I have this day, at (3) ——— Cairnmore Gardens, Palmure, ——— in the County of Kirkcudbright ——— separately from any other Medical Practitioner, visited and personally examined (4) Annie Elizabeth Hannah, Cairnmore Gardens, Palmure, ——— and that the said Annie Elizabeth Hannah, ——— is a (5) person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Melancholic appe... Has evidently lost flesh. Says that she cannot ... out or do anything, when there is no reas... why she should not do both. Sits in a ... with downcast looks and answers questions ... reluctantly.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Worries about nothing. Avoids company ... off her food. Gets nervous if any one ... near her. Has been under treatment in ... asylum before.

Her Father James Hannah.

Name and Medical Designation, Norman James McVie M...

Place of Abode, 14 Arthur Street, Nadon Stones

DATED this twenty-fourth day of March, — One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Alexander Thomson ——— being a (1) Doctor of Medicine of the University, and Surgeon ——— and being in actual practice as a (2) Physician & Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Annie Elizabeth Hannah, Hunter, Cairnmore Gardens, Cairnmore, Nadon Stones, and that the said Annie Elizabeth Hannah, ——— is a (5) person of unsound mind, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself; (6) Her depressed appearance; weakness of intellect; says she does not work, read or do anything or care for anything; fears that something is going to happen to her, and feels very nervous in consequence.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode 27 Curtis Street, Dumfries

DATED this twenty fifth day of March, — One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned Alexander Thomson, being (1) a Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) The Crichton Inst in the County of Dumfries, seen and personally examined Annie Elizabeth Hannah, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson M.D.

DATED this Twenty fifth day of March, — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Annie Elizabeth Hannah — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address James Hannah

Date Cairnmore Palnure. 25th March 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the (4) Dumfries & Galloway at Dumfries, — having had produced to me, with a Petition at the instance of (5) James Hannah, Cairnsmore, Palnure, Galloway, — Certificates under the hands of Norman James McKie, and Alexander Thomson — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Annie Elizabeth Hannah, Cairnsmore, Palnure, Galloway, [illegible] and that the said Annie Elizabeth Hannah is a (7) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Annie Elizabeth Hannah, as a patient into the (8) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Annie Elizabeth Hannah, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(8) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty sixth day of March One thousand nine hundred and two years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution, Dumfries.

(8) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8854.

Annie Elizabeth Hannah

Adm: 25 March 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Renfrew & Bute *and his Substitutes,—*

The Petition of Robert Gray, Joiner & Builder, Greenock

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that your Petitioner's (3) son John Gray is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Gray to the Crichton Institution, Dumfries, and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Robert Gray

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 25th (4) day of March One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Gray
2. Sex and Age,	Male. 39
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Mercantile
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	1 Union St., Greenock.
7. Place where Found and Examined,	do
8. Length of time Insane,	Several months
9. Whether First Attack,	first attack
10. Age (if known) on First Attack,	38.
11. When and where previously under Examination and Treatment (5)	never before
12. Duration of Existing Attack,	several months
13. Supposed Cause,	disappointment in business
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	none
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Gray. Greenock. No
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

(5) Patient has previously in an Asylum, state date of latest admission. If previously under Medical or Surgical treatment.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 25th day of March One thousand nine hundred and two years.

(To be signed by the party applying) Robert Gray P. p.

S. & A. C.—April 1901.

MEDICAL CERTIFICATE. No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, [illegible] being a (1) [illegible] and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) No 1 [illegible] in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) John Gray, Mercantile Clerk and that the said John Gray is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) [illegible]

Name and Medical Designation, [illegible]

Place of Abode, [illegible]

DATED this twenty-fifth day of March One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Stewart Cook being a (1) Bachelor of Medicine & Surgeon Universities and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) No 1 Union Street, Greenock in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) John Gray, Mercantile Clerk and that the said John Gray is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He told me that a firm of China Merchants were willing for him to become a managing partner and to marry the daughter of the senior partner. He says he should be manager of the Caledonia Railway Co, of Car Roy Shipbuilding Yard &c &c and has been prevented owing to his relations not acting as media between him and the Companies. When his sister entered the room he was insolent.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His sister states that he is abusive & difficult to manage at home, suspecting her & her father of intercepting letters &c. He has lately threatened to injure them.

Name and Medical Designation, Wm S Cook MB

Place of Abode, 3 Bridgeman Crescent Greenock

DATED this twenty fourth day of March One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

(1) State medical qualification.

(2) State place of examination.

And I further certify that the case of the said person is one of Emergency.

(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the

Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Arthur Jamieson Gray, Advocate
~~Sheriff~~ Substitute of ~~the~~ (1) Renfrew & Bute
having had produced to me, with a Petition at the instance of (2) Robert Gray, Joiner and Builder - Greenock -
Certificates under the hands of James Wallace
and William Stewart Cook - being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Gray. and that the said John Gray. is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Gray as a patient into the (6) Crichton ~~Asylum~~ of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Gray. which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Greenock] this twenty fifth day of March One thousand nine hundred and two

To the Superintendent of the (6) Crichton Institution
~~Asylum of~~ Dumfries

[*Signature*] A. J. Gray

(6) Public, District, Parochial, or Private.

No. 8858.

John Gray.

Adm. 24th March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the~~ (2) County of Dumfries ~~Galloway~~, and his Substitute, at Dumfries

The Petition of James Richardson Inspector of Poor Middlebie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Cochrane

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Cochrane to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) James Richardson Inspector of Poor Middlebie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Eighth (4) day of March — One thousand ~~eight~~ nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Cochrane
2. Sex and Age,	Female, age 50 years
3. Married, Single, or Widowed,	Single,
4. Condition of Life, and previous Occupation (if any),	Housekeeper,
5. Religious Persuasion, so far as known,	Protestant,
6. Previous Place of Abode,	Dunkeld,
7. Place where Found and Examined,	Blairlogie,
8. Length of time Insane,	Been weak minded for two or three years.
9. Whether First Attack,	Yes first attack.
10. Age (if known) on First Attack,	50 years,
11. When and where previously under Examination and Treatment (5),	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Middlebie Parish Council
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Cochrane (Her father) Her Brother is in the Asylum
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) First has only in an asylum, state date of latest or approximate. If only under care or treatment.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty Eighth day of March — One thousand nine hundred and two

(*To be signed by the party applying*) James Richardson Inspector of Poor

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Gilroy Rochester Fellow Fellow and Master in Surgery of Glasgow University and a Licentiate of the Faculty ~~Physician Surgeon~~ Physicians & Surgeons of Glasgow and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) Parish of Middlebie, ~~Dumfriesshire~~ in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Cochrane, Pauper and that the said Mary Cochrane, Pauper, is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
General Shaking of the upper limbs tremors ditto of tongue She tells me she had poisoned her leg & it is dead now & conct that it was her own wilful act entirely and that she will neither go to bed nor accept of nourishment

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
She has threatened to cut her throat and wont allow Sister to cook my food when it ought to be being got & communicated by her father John Cochrane

Name and Medical Designation, James Gilroy M.D. C.M.

Place of Abode, Waterbeck Eccleschan

DATED this Twenty Eight day of March One thousand eight hundred and Two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, or a person of unsound mind.

I, the undersigned, J. F. Bell Bachelor of Medicine & Master in Surgery of Edinburgh University being a (1) and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) in the parish of Middlebie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Cochrane, Pauper Blenkins and that the said Mary Cochrane is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Patient absolutely refuses to speak to me. Has vacant dull appearance, General tremor of the upper extremities. Shrinks away from corner of the house, has a limited dilatation of the pupils. In short has all the symptoms of insanity

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
John Cochrane (her father) informs me that she has attempted suicide with a knife does not sleep at night but walks about the house. Has a very poor appetite

Name and Medical Designation, J. F. Bell M.B.

Place of Abode J. C. Kerlie

DATED this twenty eighth day of March One thousand eight hundred and Two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Gibroy
being (1) M.B. L.R.C.S.
hereby certify, on soul and conscience, that I have this day, at (2) Blenkins
in the County of Dumfries, seen and personally examined
Mary Cochrane Pauper, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

James Gibroy M.B.

DATED this Twenty Eighth day of March One thousand ~~eight~~ nine hundred and Two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein Mary Cochrane
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ~~Pauper~~ Inspector of Poor.

Signature and Address James Richardson Inspector of Poor Middlebie Ecclefechan

Date 28 March 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute
of ~~the~~ (1) Dumfries & Galloway at Dumfries.
having had produced to me, with a Petition at the instance of (2) James
Richardson, Inspector of Poor, Middlebie,
Certificates under the hands of James Gibroy,
and J. S. Bell; being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3)
Mary Cochrane Blenkins, Middlebie, Dumfriesshire, and that the said
Mary Cochrane, is a (4) person of unsound
mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Cochrane as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Cochrane, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Thirty First day of ~~March~~ March
One thousand ~~eight hundred and~~ nine hundred and two years.
Three words deleted

To the Superintendent of the (1) Public,-
Asylum of Crichton Royal Institution at Dumfries

(1) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No 8859

Mary Cochrane
(Middlebie)

Adm. 31st March 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, *and his Substitute* — at Dumfries:

The Petition of John McCaig, Inspector of Poor, Stoneykirk, Trainer.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Gilmour, pauper

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Gilmour to the Crichton Royal Instn. and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) John McCaig

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (4) day of April — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Gilmour.
2. Sex and Age,	Male, 15. Born 24/11/1886.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	No occupation.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	32 Carntyne Road
7. Place where Found and Examined,	32 Carntyne Road.
8. Length of time Insane,	Imbecile from Birth.
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	Not previously treated.
12. Duration of Existing Attack,	Imbecile from Birth
13. Supposed Cause,	— Congenital defect.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stoneykirk,
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Parents address Andrew Gilmour 32 Carntyne Rd Glasgow.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

(5) If patient has previously in an asylum, state date of latest admission or appointment. If previously under examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eleventh day of April, — One thousand nine hundred and two years.

(*To be signed by the party applying*) John McCaig

T. & A. C.—Jan. 1900.

P 7

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Mathew Martin, ——— being a (1) M.B., from Glasgow University ——— and being in actual practice as a (2) Physician & Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) 3½ Centre Parkhead, Glasgow ——— in the County of Lanark, Glasgow, ——— separately from any other Medical Practitioner, visited and personally examined (4) William Gilmour, ——— residing there, Pauper, ——— and that the said William Gilmour, ——— is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is Silly looking in manner & appearance dawers about house grundy his teeth & makes attempts to speak he is totally unable to take care of himself from dress &c into Cons

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Mother States that he has been Silly since childhood. Dirty in his habits & Could look after himself.

Name and Medical Designation, Mathew Martin M.B.

Place of Abode, Glencairn Tollcross Rd.

DATED this 10th day of April, ——— One thousand nine hundred and Two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Carmell, ——— being a (1) Licentiate of the Royal College of Physicians and of the Faculty of Physicians & Surgeons Gla and being in actual practice as a (2) Physician ——— do hereby certify, on soul and conscience, that I have this day, at (3) 52 Carntyne Road, Glasgow, ——— in the County of Lanark ——— separately from any other Medical Practitioner, visited and personally examined (4) William Gilmour, ——— residing there, Pauper ——— and that the said William Gilmour, ——— is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is most defici in intelligence, is quite idiotic in conduct, and is unable to indicate his wants, or give any account of himself &c.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His mother states that he is dirty in his habits, and has been weak minded since infancy. -

Name and Medical Designation, J. Carmell L.R.C.P.&S.

Place of Abode 5 Royal Crescent Glasg

DATED this 10th day of April, ——— One thousand nine hundred and two. Years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Carswell, being (1) a Fellow of the Royal College of Physicians & Surgeons Edinburgh & also a Licentiate of the Royal College of Physicians & Surgeons Glasgow, hereby certify, on soul and conscience, that I have this day, at (2) 82 Carruthers Street, Hillhead in the County of Lanark, seen and personally examined William Gilmour, pauper, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

John Carswell LR.C.P.E.&L.

DATED this 10th day of April, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum Dumfries to receive therein William Gilmour, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Emergency Officer

Signature and Address Alexander Bird 46 Castle Street Glasgow

Date 11th April, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, (1) Honorary Sheriff-Substitute of the (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) John McCaig, Inspector of Poor, Stonykirk, Stranraer, Certificates under the hands of Matthew Martin M.B. & C.M. and John Carswell, L.R.C.P.E. &c. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Gilmour, 32 Barntyne Road, Parkhead, Glasgow (Pauper) and that the said William Gilmour, is a (5) Person of unsound mind an Idiot, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Gilmour as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize him transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Gilmour which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fourteenth day of April, — One thousand nine hundred and two years. —

To the Superintendent of the (6) Public *Asylum of* Crichton Royal Institution Dumfries.

(6) Public, District, Parochial, or Private.

[Signature] John Clerk

No. 8860.

William Gilmour.

(Stonykirk)

Adm: 11 April 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,*— at Dumfries:

The Petition of John Mc. Cay Inspector of Poor, Stoneykirk; Kirkmaiden

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Jane Gilmour your Petitioner's (3) pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Helen Jane Gilmour, to the Crichton Royal Instr. and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John McCay

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (4) day of April, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Helen Jane Gilmour
2. Sex and Age,	Female, 13 Born 2/9/1888.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	No occupation
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	32 Carntyne Road.
7. Place where Found and Examined,	32 Carntyne Road.
8. Length of time Insane,	Imbecile from Birth.
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	Not previously treated.
12. Duration of Existing Attack,	Imbecile from Birth.
13. Supposed Cause,	Congenital Defect.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stoneykirk
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Parents address Andrew Gilmour 32 Carntyne Rd. Glasgow.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under Examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eleventh day of April — One thousand nine hundred and two years. *(To be signed by the party applying)* John McCay

T. & A. C.—Jan. 1900.

P p

No. 8860

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, being a (1) M.B., & Ch.B. Glasgow University, and being in actual practice as a (2) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) 32 Cantyre Parkhead, Glasgow, in the City & County of Glasgow, separately from any other Medical Practitioner, visited and personally examined (4) Helen Jane Gilmour, residing there, Pauper, and that the said Helen Jane Gilmour is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is silly & foolish looking in manner & appearance dances & sings above house chewing pieces of paper making peculiar gestures & speech she is totally unable to take care herself from these answers questions & interviews

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her mother states that she has been weak minded since childhood dirty in her habits & quite careless of looking after herself.

Name and Medical Designation, Matthew. Math. MB.

Place of Abode, Glencairn Lodge Rd: Gl

DATED this 10th day of April, One thousand nine hundred and two years.

MEDICAL CERTIFICATE. No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Carswell, being a (1) Licentiate of the Royal College of Physicians Edin and of the Faculty of Physicians & Surgeons, Glas and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) 32 Cantyre Road, Glasgow, in the County of Lanark, separately from any other Medical Practitioner, visited and personally examined (4), Helen Jane Gilmour, residing there, Pauper, and that the said Helen Jane Gilmour is an Idiot, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is most defect in intelligence, and is quite idiotic in conduct. She cannot give any account of herself, or understand anything done to her.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her mother states that she has been weak minded since infancy, and is dirty in her habits.

Name and Medical Designation, J. Carswell LRCP.E

Place of Abode 5 Royal Crescent Glas

DATED this 10th day of April, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Carmill, being (1) a Licentiate of the Royal College of Physicians (1) State medical qualification. hereby certify, on soul and conscience, that I have this day, at (2) 32 Carntyne Road Glasgow in the County of Lanark, seen and personally examined (2) State place of examination. Helen Jane Gilmour, Spinster, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency. (3) State place at which Asylum is situated.

J. Carmill L.R.C.P.E.

DATED this 10th day of April, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum Dumfries to receive therein Helen Jane Gilmour to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Nursing Officer

Signature and Address Helen Bell, 46 John Street Govan.

Date 10th April, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, (1) Honorary Sheriff-Substitute, of ~~the~~ (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) John McCaig, Inspector of Poor, Stoneykirk, Stranraer, Certificates under the hands of Matthew Martin, M.B. & C.M. and John Carswell, L.R.C.P.E. &c. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Helen Jane Gilmour, 32 Carntyne Road, Parkhead Glasgow (a Pauper) and that the said Helen Jane Gilmour, 32 Carntyne Road, Glasgow, is a (5) Person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Jane Gilmour as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen Jane Gilmour, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fourteenth day of April One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] John Clerk

No. 8861

Helen Jane Gilmour

(Stonehouse)

Adm: 11 April 1902.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[Form A]

25 *and* 26 *Vict., Cap.* 54, *Sec.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Elizabeth Irving your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Irving to the Crichton Royal Institution at Dumfries, and to sanction her admission into the said Institution.

Miles Mc Innes

(To be signed by the Party applying).....

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (*) day of April One thousand ~~eight~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Irving
2. Sex and age,	Female – 66
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	–
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	Locharbriggs
7. Place where found and examined,	Locharbriggs
8. Length of time Insane,	some years – Imbecile all her life.
9. Whether First Attack,	not known
10. Age (if known) on First Attack,	not known
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	no where
12. Duration of Existing Attack,	not known
13. Supposed Cause,	not known
14. Whether Subject to Epilepsy,	No
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	18th June, 1896 she has been boarded out in a private dwelling
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	None so far as known.
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Tenth day of April One thousand ~~eight~~ nine hundred and two years.

Miles Mc Innes

(To be signed by the party applying).....

No. 8961

MEDICAL CERTIFICATE, NO. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Peter Murray Kerr being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and being in actual practice as a (2) General Practitioner do hereby certify, on Soul and Conscience, that I have this day, at (3) Lochaubrigg ~~Dumfries~~ in the County of ~~Dumfries~~ separately from any other Medical practitioner, visited and personally examined (4) Elizabeth Irving. pauper Lochaubrigg and that the said Elizabeth Irving is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Her insane appearance and manner she is imbecile and is unable to engage in ordinary conversation

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr MB

Place of Abode, 27 Castle Street Dumfries

DATED this tenth day of April One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, NO. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Smith being a (1) Graduate in Medicine of Edinburgh University and being in actual practice as a (2) Physician & Surgeon do hereby certify, on Soul and Conscience, that I have this day, at (3) Lochaubrigg, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Irving Lochaubrigg. pauper and that the said Elizabeth Irving is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her imbecile appearance and inability to answer the simplest questions

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Janet Kay informs me that she is quite a imbecile having no power to do anything for herself & lately she has become very dirty in her habits & unmanageable

Name and Medical Designation, John Smith MB &c

Place of Abode, 47 Castle St. Dumfries

DATED this tenth day of April One thousand ~~eight~~ nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr being (1) Graduate of Medicine hereby certify, on Soul and Conscience, that I have this day, at (2) Lochabriggs in the County of ~~Dumfries~~ Dumfries, seen and personally examined Elizabeth Irving, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum. *

And I further certify that the case of the said person is one of Emergency.

* and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr

DATED this Tenth day of April One thousand ~~eight~~ nine hundred and two years

(1) State Medical qualification.
(2) State place of Examination.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, ——— hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein ——— to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ———

Signature and Address, ———

Date, ———

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate Sheriff-Substitute of ~~the County of~~ Dumfries & Galloway, at Dumfries having had produced to me, with a Petition at the instance of (1) Millesell Dumfries Inspector of Poor, Dumfries Certificates under the hands of Peter Murray Kerr and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Elizabeth Irving Lochabriggs, Dumfries and that the said Elizabeth Irving is a (3) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Irving as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Elizabeth Irving which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Eleventh day of April One thousand ~~eight hundred and~~ nine hundred and two years.

Five words deleted.

Geo: Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8862.

Name Elizabeth Irving.
(Dumfries)

Date of Admission 11th April 1902.

N.B.—This Form shall remain in the keeping of the Superintendant of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff —— *of the* (2) Sheriffdom *of* Renfrew & Bute *and his Substitutes,—*

The Petition of James Hutcheson 12 St Lawrence Street, Greenock

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexis Meredie Hutcheson —— your Petitioner's (3) daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexis Meredie Hutcheson —— to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) James Hutcheson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fourteenth (4) day of April —— One thousand ~~eight hundred and~~ nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Alexis Meredie Hutcheson
2. Sex and Age,	Female 18 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	At Home
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	12 St Lawrence St Greenock
7. Place where Found and Examined,	Do Do Do Do
8. Length of time Insane,	14 days
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	18 years
11. When and where previously under Examination and Treatment (5)	Never
12. Duration of Existing Attack,	14 days
13. Supposed Cause,	Salvation Army
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Hutcheson (Father) 12 St Lawrence St Greenock Yes.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an asylum, state date of latest admission or application thereto. If previously under examination or treatment state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fourteenth day of April —— One thousand ~~eight hundred and~~ nine hundred and two.

(To be signed by the party applying) James Hutcheson

T. & A. C.—Jany. 1898. P p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, being a (1) James Gavin being a Graduate of Medicine & Surgery of Glasgow Universities

and being in actual practice as a (2) Physician

do hereby certify, on soul and conscience, that I have this day, at (3) 12 Dalrymple Lawmarnock Dr Glenpark in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) Alexis Moodie Hutcheson and that the said Alexis M Hutcheson is a (5) person of unsound Mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Laughing & talking by times, refuses to speak & when pressed with questions, says she is very wicked & deserves Sulphur & brimstone. Shows a complete change of character

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That every one is going to heaven but herself that she is the Devil & is dancing the Devil dance & is going to the bottomless pit with the Devil & angels

Boy Parents

Name and Medical Designation, James Gavin M.D.

Place of Abode, 56 Ardgowan St Greenock

DATED this 13 day of April One thousand ~~eight~~ hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be,*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Edward Mackay being a Graduate of Medicine of the Glasgow University being a (1) General Practioner

and being in actual practice as a (2)

do hereby certify, on soul and conscience, that I have this day, at (3) 12 Dalrymple Lawn Greenock. in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) Alexis Moodie Hutcheson and that the said Alexis Moodie Hutcheson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She says she is a great hypocrite, that a cousin by marriage has mesmerised her, and brought trouble upon her — that in everything she does she mocks God. At sometimes she answers a question fairly, at other times she talks mad

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her father & mother told me, that their daughter said she was the devil — and that she was going to the bottomless pit with the devil and his angels.

Name and Medical Designation, Edward Mackay M.D.

Place of Abode 8 George Square — Green

DATED this thirteenth day of April One thousand ~~eight~~ hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Dated this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the

Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, A. Y. Glegg Advocate (1) Sheriff Substitute
of the (2) Sheriffdom of Renfrew & Bute
having had produced to me, with a Petition at the instance of (3) James Mutchison
Farmer 12 St Lawrence Street Greenock
Certificates under the hands of James Lawrie, M.B.C.M. Greenock
and Edward Mackay, M.B.Ch. Greenock being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Alexis Nicolai Mutchison and that the said
Alexis Nicolai Mutchison is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexis Nicolai Mutchison as a Patient into the (6) Crichton Royal ~~Asylum of~~ Crichton Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexis Nicolai Mutchison which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated [at Greenock] this fourteenth day of April
One thousand ~~eight hundred and~~ nine hundred and two.

To the Superintendent of the (7) Crichton
~~Asylum of~~ Royal Institution Dumfries

(7) Public, District, Parochial, or Private.

[Signature] A. Y. Glegg

No. 8863.

Alexis Jacodis Hutcheson

Adm: 14 April 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, ——— *and his Substitutes,*—at Dumfries:

The Petition of Andrew McNab, Bleacher, Midton, Howwood, Renfrewshire: ———

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret McLaren McNab, ——

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Sister, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret McLaren McNab, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Andrew McNab

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty-First (4) day of — April — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret McLaren McNab.
2. Sex and Age,	Female - 56 years. -
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Gentlewoman -
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Midton, Howwood, Renfrewshire.
7. Place where Found and Examined,	Dumfries. —
8. Length of time Insane,	—
9. Whether First Attack,	Fourth.
10. Age (if known) on First Attack,	48.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution - Augt. 1899.
12. Duration of Existing Attack,	— One week
13. Supposed Cause,	— Recurrent
14. Whether subject to Epilepsy,	— No
15. Whether Suicidal,	— No
16. Whether Dangerous to others,	— Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Andrew McNab. Brother: Midton, Howwood, Renfrewshire. No. -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under observation or treatment elsewhere, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eighteenth day of April — One thousand nine hundred and two years.

(*To be signed by the party applying*) Andrew McNab

P. p.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson —
being a (1) Doctor of Medicine of Glasgow
University and Surgeon —
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 27 Carlto
Street Dumfries, — in the County of
Dumfries, — separately from any other Medical Practitioner,
visited and personally examined (4) Margaret McLaren McNa
Spinster Milton, Howwood, Renfrewshire and that
the said Margaret McLaren McNab is a (5) person
of unsound mind, — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is in a state of acute excitement — Shouting and talking in the most incoherent manner —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson MD

Place of Abode, 27 Carlto Street Dumfries

DATED this Eighteenth day of April — One thousand nine hundred and Two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Peter Murray Kerr —
being a (1) Bachelor of Medicine and Master in Surgery of
the University of Edinburgh, —
and being in actual practice as a (2) General Practitioner,
do hereby certify, on soul and conscience, that I have this day, at (3) Crichton
Royal Institution, — in the County of
Dumfries — separately from any other Medical Practitioner,
visited and personally examined (4) Margaret McLaren McNab
Spinster. Milton Howwood Renfrewshire, — and that
the said Margaret McLaren McNab, — is a (5) person of
unsound mind — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Her mean appearance and manner
She talks in a very excitement manner
is very excited. Shouts heard by the p
shouts in a loud voice.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M

Place of Abode, 27 Castle Stree Dumfr

DATED this Twenty first day of April, — One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson —
being (1) a Doctor of Medicine 27 Castle St,
hereby certify, on soul and conscience, that I have this day, at (2) 27 Castle St,
in the County of Dumfries, seen and personally examined
Margaret McLaren McNab —, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum
at (3) Dumfries. —

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson MD.

Dated this Eighteenth day of April, — One thousand nine hundred and two years. —

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein Margaret McLaren McNab —
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother.

Signature and Address Jno McNab,

Date 18th April 1908.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary Sheriff-Substitute
of ~~the~~ (1) Dumfries & Galloway at Dumfries —
having had produced to me, with a Petition at the instance of (2) Andrew McNab,
Bleacher, Glowwood, ~~Kilbirnie~~, Renfrewshire, —
Certificates under the hands of Alexander Thomson
and Peter Murray Kerr — being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3)
Margaret McLaren McNab, Kilbirnie, Glowwood, Renfrewshire (Patient's Name) and that the said
Margaret McLaren McNab, is a (4) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret McLaren McNab as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret McLaren McNab — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(2) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

Dated [at Dumfries] this Twenty first day of April, —
One thousand nine hundred and two years. Two words deleted

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution at Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] John Clerk

No. 8964.

Margaret MacLaren McNab.

Adm: 18 April 1902.

N.—This Form shall remain in the keeping of the Superintendent of the Asylum to which it is addressed.

[FORM A.]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway, ——— *and his Substitutes,—* at Dumfries:

The Petition of Annie Erwin, Douievale, Dumfries:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Mary Ann Erwin, Douievale, Dumfries, ———

State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (1) Sister, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Mary Ann Erwin ——— to the Crichton Royal Institution at Dumfries, and and to Sanction her admission into the said Institution.

(To be signed by the Party applying) Annie Erwin

The date of the Petition must be within fourteen clear days following the dates of the Medical Certificate.

DATED this Nineteenth (2) day of April — One thousand ~~eight~~ nine hundred and two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1 Christian Name and Surname of Patient at length,	Mary Ann Erwin.
2 Sex and Age,	Female, 50 years of age.
3 Married, Single, or Widowed,	Single.
4 Condition of Life, and previous Occupation (if any),	No occupation.
5 Religious persuasion, so far as known,	Roman Catholic.
6 Previous Place of Abode,	Douievale, Dumfries.
7 Place where Found and Examined,	Douievale, Dumfries.
8 Length of Time Insane,	Some years, but gradually getting worse.
9 Whether First Attack,	Yes.
10 Age (if known) on First Attack,	
11 When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	—
12 Duration of Existing Attack,	Some years.
13 Supposed Cause,	Mental deficiency.
14 Whether subject to Epilepsy,	No
15 Whether Suicidal,	She has threatened to commit suicide.
16 Whether dangerous to others,	
17 Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18 Date of becoming Chargeable,	—
19 Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Annie Erwin, Douievale, Dumfries, - Sister - One brother feeble minded (Carstairs.)
20 Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventeenth day of April,— One thousand ~~eight~~ nine hundred and two years.

(To be signed by party applying) Annie Erwin

No. 8864

MEDICAL CERTIFICATE No. I.

I, the undersigned Hugh Cunningham —
being a (1) Licentiate of the Royal College of Physicians in Edinburgh and M.D. Brussels
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) —
Douivale, Dumfries, — in the County of
Dumfries, — separately from any other Medical Practitioner,
visited and personally examined (4) Mary Ann Erwin,
spinster, Douivale, Dumfries, — and that
the said Mary Ann Erwin, — is a (5)
person of unsound mind — and a proper person to be
detained under Care and Treatment, and that I have formed this opinion
upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her facial expression indicates mental disorder, and she imagines that all her relations wish to do her harm.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her sister, Annie Erwin, informs me that she has on several occasions threatened to commit suicide. .

Name and Medical Designation, Hugh Cunningham M.D
Place of abode, 25 Castle Street, Dumfries

DATED this fourteenth day of April, One thousand nine ~~eight~~ hundred and two years. .

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise as the case may be.*

(3) *Insert the Street, and number of the house, (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

MEDICAL CERTIFICATE No. II.

I, the undersigned John Smith,
being a (1) Registered Medical Practitioner
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) The Royal Victoria Dumfries, in the County of D
separately from any other Medical Practitioner,
visited and personally examined (4) Mary Ann Erwin,
Douvale, Dumfries, and that
the said Mary Ann Erwin, is a (5)
person of unsound mind and a proper person to be
detained under Care and Treatment, and that I have formed this opinion
upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her facial appearance & advises regarding her family.

2. Other facts (if any) indicating Insanity communicated to me by
others: (7)

Name and Medical Designation, John Smith
Place of abode, 43 Castle St Dumfries

DATED this fifteenth day of April, One thousand nine ~~eight~~ hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned Hugh Cunningham, being (1) Licentiate of the Royal College of Physicians in Edinburgh, and M.D. Brussels, hereby certify, on soul and conscience, that I have this day, at (2) Donicvale, Dumfries. in the County of Dumfries, seen and personally examined Mary Ann Erwin, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum. And I further certify that the case of the said person is one of Emergency. And is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries. Hugh Cunningham M.D.

(1) State medical qualification.
(2) State place of examination.

DATED, this seventeenth day of April, One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Mary Ann Erwin, to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister

Signature and Address, Annie Erwin X

Date, 18th April, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary ~~Sheriff~~ Substitute of ~~the the County of~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Annie Erwin, Donicvale, Dumfries, Certificates under the hands of Hugh Cunningham, and John Smith, ——, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Mary Ann Erwin, Donicvale, Dumfries. (Petr. Sister) and that the said Mary Ann Erwin is a (3) person of unsound mind, and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Mary Ann Erwin — as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann Erwin which accompanied the said Petition.

(1) Insert Name & Designation
(2) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Nineteenth day of April — One thousand ~~eight~~ nine hundred and two years. Two printed words deleted.

Jn. Clerk

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8865.

Name, Mary Ann Erwin.

Date of Admission, 18 April 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of Dumfries and Galloway *and his Substitutes,—*

The Petition of Samuel Dickson Morrison Insp. of Poor Parish of Whithorn

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Swan Saulter on whose behalf application for relief has been made (Inspector of Poor) your Petitioner's (*) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Samuel Swan to the Crichton Royal Asylum and to sanction his admission into the said Asylum.

(*) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) S. D. Morrison Insp. of Poor Parish of Whithorn

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this nineteenth (*) day of April One thousand nine eight hundred and two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Samuel Swan
2. Sex and Age,	Male 56 Years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Gasman
5. Religious Persuasion, so far as known,	Prot
6. Previous Place of Abode,	not known
7. Place where Found and Examined,	Whithorn
8. Length of time Insane,	Sudden
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	56
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	None
12. Duration of Existing Attack,	Not noticed until attempted suicide
13. Supposed Cause,	Severe depression
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	doubtful
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Whithorn
18. Date of becoming Chargeable,	From this date
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Potts - wife None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this nineteenth day of April One thousand nine eight hundred and two

(*To be signed by the Party applying*) S. D. Morrison Insp. of Poor Whithorn

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Flemming Smith being a (1) Bachelor of medicine & Master of Surgery Edinburgh University and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) The Gazeuse Kings Road Whithorn in the County of Brighton separately from any other Medical Practitioner, visited and personally examined (4) Samuel Swan Gasman and that the said Samuel Swan is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1 Facts indicating Insanity observed by myself: (6)

He attempted to commit suicide this morning by cutting his throat

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, James F. Smith M.B.C.S.

Place of Abode 7 & Large St Whithorn

DATED this nineteenth day of April One thousand ~~eight~~ nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Hanway Douglas being a (1) Bachelor of Medicine and Master of Surgery of the University of Glasgow and being in actual practice as a (2) general practitioner do hereby certify, on soul and conscience, that I have this day, at (3) the Gazeuse Kings Road Whithorn in the County of Brighton separately from any other Medical Practitioner, visited and personally examined (4) Samuel Swan, Gasman and that the said Samuel Swan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)

For the last six weeks the Samuel Swan has been nervous and depressed, he imagined that he had an incurable disease and was going to die soon.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

His wife states that early this morning he tried to cut his throat, first with a razor and then with a pocket knife.

Name and Medical Designation, John H. Douglas. M.B.

Place of Abode St. Ninians. Whithorn

DATED this nineteenth day of April One thousand eight hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, }

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Ebenezer Shaw (1) Sheriff Substitute
of the (2) Sheriffdom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) Samuel Dickson
Morrison Inspector of Poor Parish of Whithorn
Certificates under the hands of James Fleming Smith M.B.C.M. & George Whitson
and John Hannay Douglas M.B.C.M. & Alexander Whitson being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Samuel Swan, Gasworks, King Road Whithorn and that the said
Samuel Swan is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to
receive the said Samuel Swan as a Patient into the
(6) Crichton Royal Asylum of Dumfries and I authorize
his Transmission to the said Asylum accordingly; and I transmit you herewith
the said Medical Certificates, and a Statement regarding the said Samuel Swan
which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED this nineteenth day of April One thousand ~~eight~~ nine hundred and two.

Ebenezer Shaw

To the Superintendent of the (7) Crichton Royal
Asylum of Dumfries

(7) Public, District, Parochial, or Private.

No. 8866.

Samuel Swan.

(Withdrawn.)

Adm: 19 April 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~Shire~~ County of Dumfries, *and his Substitutes, at Dumfries.*

The Petition of James Anderson, Rosebank Dunscore,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Barbara Anderson,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) daughter, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Barbara Anderson, to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) James Anderson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty-first day of April, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Barbara Anderson.
2. Sex and Age,	Female - Twenty four years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farm Servant.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Rosebank, Dunscore.
7. Place where Found and Examined,	Rosebank - Dunscore.
8. Length of time Insane,	Abut three months.
9. Whether First Attack,	no - Third attack.
10. Age (if known) on First Attack,	Abut eighteen years old.
If patient has previously been in an Asylum, state date of latest admission or approximate thereto. If previously under Asylum care or treatment state fact. 11. When and where previously under Examination and Treatment (1)	1847 + 1849 - Crichton Institution.
12. Duration of Existing Attack,	abut three months
13. Supposed Cause,	Death of an aunt.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Anderson, Rosebank - Dunscore. Father -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twentieth day of April, One thousand nine hundred and two.

(To be signed by the party applying) James Anderson

T. & A. C.—Nov. 1896

P. p.

No. 8866. Barbara Anderson.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Welsh Smith
being a (1) Bachelor of Medicine and Master of Surgery of Edinburgh University,
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Rosebank, Duncore, Dumfries,
separately from any other Medical Practitioner, in the County of
visited and personally examined (4) Barbara Anderson farm servant Duncore,
and that the said Barbara Anderson, is a (5) Lunatic
and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her insane manner, appearance, and unstable mental condition. Easily excited to violent & uncontrollable laughter and to displays of passion without due cause. She is incoherent in her ideas and noisy and abusive in her

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her mother Mrs Anderson, states that at times she is very violent and destructive, and beyond all control, and that she is subject to delusions.

Name and Medical Designation, J. W. Smith M.B.Ch.B.

Place of Abode, Duncore, Dumfriesshire

DATED this twentieth day of April, — One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Thompson,
being a (1) Doctor of Medicine of Glasgow University, and Surgeon,
and being in actual practice as a (2) Physician and Surgeon
do hereby, certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries,
separately from any other Medical Practitioner, in the County of
visited and personally examined (4) Barbara Anderson, Farm Servant, Rosebank, Duncore,
and that the said Barbara Anderson is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks in an excited, and very incoherent manner about where she has been, and what she has done, and gets more and more excited as she rambles on —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode 27 Castle Street, Dumfries

DATED this twenty first day of April, — One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Welsh Smith, being (1) a graduate in Medicine of Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) Roebank, in the County of Dumfries, seen and personally examined Barbara Anderson, ——, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

J. Welsh Smith M.B. C.M.

DATED this twenty-sixth day of April, One thousand eight hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Barbara Anderson, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address James Anderson Roebank Dumfries

Date Twenty-sixth April, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (1) Sheriff-Substitute, of (2) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) James Anderson, Roebank, Dumfries, Dumfriesshire, Certificates under the hands of John Welsh Smith, —— and Alexander Thomson —— being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Barbara Anderson, Farmlevenant, Roebank, Dumfries, (Petr's daughter) and that the said Barbara Anderson is a (5) Lunatic, a person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Barbara Anderson as a Patient into the (6) Public —— Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Barbara Anderson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,—] this Twenty-second day of April, One thousand ~~eight hundred and nine~~ and two years.—
~~Five printed words deleted.~~

To the Superintendent of the (7) Public, *Asylum of* Crichton Royal Institution, Dumfries.

[*Signature*] John Clerk

(7) Public, District, Parochial, or Private.

No. 8864

Barbara Anderson.

Adm: 21 April 1902.

S.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Dumfries and Galloway *and his Substitutes,*—

The Petition of John Maxwell Inspector of the Poor for the Parish of Drogheer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Johnstone, 36 King St. your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Johnstone to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John Maxwell,

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty first (4) day of April One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Johnstone.
2. Sex and Age,	Female, aged 71 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Working Class. Sewer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Has been in same house for sometime
7. Place where Found and Examined,	36 King Street. Maxwelltown
8. Length of time Insane,	a considerable number of years.
9. Whether First Attack,	Continuous as above.
10. Age (if known) on First Attack,	Not known.
11. When and where previously under Examination and Treatment (5)	Never under treatment before. Her sister has hitherto been able to manage her. but she is now getting old & frail & can do so no longer.
12. Duration of Existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Gets violent often.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Drogheer.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Resides with her sister Helen. who is now aged about 90 years. and requires Nursing herself, and is unable to look after her sister any longer.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

(5) If patient has been previously in an Asylum, state name and date of latest admission or approximate date thereto. If previously under Treatment or Treatment not known to the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty first day of April — One thousand nine hundred & two years.

(To be signed by the party applying) John Maxwell

T. & A. C.—Jan. 1900. P p

No. 8861 Barbara Anderson

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Patrick Murray
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 36 King St
Maxwelltown in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Elizabeth Johnstone 32 Ro
Maxwelltown Pauper and that
the said Elizabeth Johnstone is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Thought I heard
come to murder her - that Queen Victoria
above all the Magistrates - that Lord
the pawnbroker of Old Kirkpatrick -

(7) *State the information, and from whom derived.*

2 Other facts (if any) indicating Insanity communicated to me by others: (7)
the neighbours state that she used to
quarrelling with her sister, & that M
she left the sisters she became -

Name and Medical Designation, P. Murray M.D.

Place of Abode, 6 Castle St Dumfries

DATED this fourteenth day of April One thousand
nine hundred & two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Dewar Robertson
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 36 King St
Maxwelltown, Dumfries. in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Elizabeth Johnstone, Pauper
36 King St Maxwelltown and that
the said Elizabeth Johnstone is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her conversation
is incoherent, and she takes fits of laughter
without any apparent cause, She persistently
calling me her brother whom she says she
for, for 40 years. She became violent when
declined the acquaintanceship.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her sister says that she declines to
housework of any kind & is somewhat flighty in
her habits. Also that she is suspicious
people. eg neighbours. or strangers to the relation
that at times she is violent & abusive.

Name and Medical Designation, John Dewar Robertson

Place of Abode 7 Terregles St Maxwelltown

DATED this nineteenth day of April One thousand
nine hundred and two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire (1) Honorary Sheriff-Substitute of the (2) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) John Maxwell Inspector of Poor, Dumfries, Certificates under the hands of Patrick Murray, and John Dewar Robson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Johnstone, 36 King Street, Maxwelltown. (a pauper) and that the said Elizabeth Johnstone is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Johnstone as a patient into the (6) Public Asylum of Southern Counties at Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Johnstone, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twenty-first day of April One thousand nine hundred and two years.

To the Superintendent of the (7) Public Asylum of Southern Counties, Dumfries.

[Signature] John Clerk

(7) Public, District, Parochial, or Private.

No. 8868.
Elizabeth Johnstone.
(Irvine.)
Adm: 21 April 1908.

S.B.—This Form

Superintendent

the Sheriff is

PET

† Sheriff or Steward.
† Shire or Stewartry.

Unto the Hon

Kirk

humbly shew

Medical Certi

† State degree of relationship or other capacity in which Pet. may stand to Lunatic.

your Petitioner is at present i

Asylum for t

mission of th

Crai

the said Asy

(To be

‡ The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED t

nine hundred

If an

1. Christian Name a
length, .

2. Sex and Age,

3. Married, Single, o

4. Condition of Life,
(if any), .

5. Religious Persuasi

6. Previous Place of

7. Place where Found

8. Length of time In

9. Whether First Att

10. Age (if known) on

Patient has previously in an Asylum, state name of Asylum and date of last apprehension. If previously under Care, state when and where.

11. When and where
tion and Treat

12. Duration of Existi

13. Supposed Cause,

14. Whether subject t

15. Whether Suicidal

16. Whether Dangero

17. Parish or Union
Pauper) is Cha

18. Christian Name
Abode of near
Patient, and
knows), and w
Family known
sane, .

19. Special circumsta
insertion of a

I certify, that, to the bes

DATED this twenty-

T. & A. C.—Feby. 1901.

(To

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~——~~ of the (2) ~~Stewartry~~ of ~~——~~ Dumfries and his Substitutes, at Dumfries

The Petition of ~~Walter~~ Walter McCall

Kirkland Glencairn

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William McCall, Kirkland Glencairn,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William McCall to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Walter McCall

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty fourth (4) day of April One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William McCall
2. Sex and Age,	Male 24.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Baker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	London
7. Place where Found and Examined,	Kirkland of Glencairn
8. Length of time Insane,	Four months
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	=
11. When and where previously under Examination and Treatment (5)	Not under treatment previously
12. Duration of Existing Attack,	Four months
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	Not epileptic
15. Whether Suicidal,	Not suicidal
16. Whether Dangerous to others,	Not dangerous
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	=
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Walter McCall, Kirkland of Glencairn. Father None known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under treatment or treatment not a fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twentieth day of April One thousand nine hundred and two

(To be signed by the party applying) Walter McCall

P P.

T. & A. C.—Feby. 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, James Alexander Adamson being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) Stockmyn Hall in the Parish of Glencairn in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) William Mc Call residing at the Kirkland of Glencairn and that the said William Mc Call is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) General appearance & behaviour: dislike displayed towards & suspicion of friends: delusions indicating hallucinations of sight & hearing: irritability: delusions:

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) marked change in disposition from his natural cheerfulness affection to kinsmen, dislike & irritability. Inquiries are being made from Kirk in Silence; that persons who are distance are shortly attends the house, & various statements indicate that he is suffering from delusions

Name and Medical Designation, } James Alexander Adamson M.B. C.M.

Place of Abode, Stockmyn Hall, Thornhill

DATED this twenty second day of April One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Smith being a (1) Graduate in Medicine of Edinburgh University and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 47 Castle St: Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) William Mc Call, butler, residing at the Kirkland of Glencairn and that the said William Mc Call is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His insane appearance Rambling conversation & delusions Insane statements regarding his journey from England to Scotland.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His father informs me that he has many delusions hearing sounds, when none exist & imagining the presence of individuals.

Name and Medical Designation, } John Smith M.B.

Place of Abode, 47 Castle St. Dumfries

DATED this Twenty first day of April One thousand nine hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Smith
being (1) Graduate in medicine of Edenburgh University
hereby certify, on soul and conscience, that I have this day, at (2) 47 Castle St
in the County of Dumfries, seen and personally examined
William McCall, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

John Smith MD &c

DATED this Twenty first day of April, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein William McCall
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address Walter McCall

Date 24th April 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clark, Honorary (1) Sheriff-Substitute
of the (2) Dumfries and Galloway at Dumfries,
having had produced to me, with a Petition at the instance of (3) Walter McCall,
Kirkland, Glencaple, Dumfriesshire
Certificates under the hands of James Alexander Adamson,
and John Smith,
being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William McCall, Kirkland, Glencaple, (Petitioner) and that the said William McCall is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William McCall as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William McCall, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty-fifth day of April, One thousand nine hundred and two years.

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution, Dumfries.

[Signature] Jno Clerk

(7) Public, District, Parochial, or Private.

No. 8869.

William McCall.

Adm. 2th April 1908.

PARISH COUNCIL OF THE PARISH OF GLASGOW
RECEIVED
19 APR. 021

16,137

[FORM B.]

COUNCIL OF THE PARISH OF MOSS
RECEIVED
14 APR. 021

GENERAL BOARD OF LUNACY SCOTLAND
18 APR. 1902

25 and 26 Vict. Cap. 54, Sec. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT A TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned (1) James Grieve being desirous to transfer William Little at present a Patient in Glasgow District Asylum, Gartloch and (2) a Pauper Lunatic of the Parish of which I am Inspector of Poor, from the said Asylum to the Crichton Royal Institution, Dumfries, to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

(1) Insert Christian and Surname.

(2) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

1 14 6 0 2

STATEMENT OF PARTICULARS.

Christian Name and Surname of Patient at length,	William Little.
Sex and Age,	Male. 27 years.
Married, Single, or Widowed,	Single.
Condition of Life, and Previous Occupation (if any),	Plumber.
Religious Persuasion, so far as known,	Protestant.
Parish to which the Lunatic (if a Pauper) is Chargeable,	Moffat.
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	Father John Little, Railway Porter, Buccleuch Street, Moffat.

No. 8209
William Orr Call.

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(Signature of Applicant) James Grieve

(3) Inspector of Poor of the Parish of Moffat.

(3) State degree of Relationship, or other capacity in which Applicant stands to Patient. If a Lunatic is a Pauper, insert "Inspector of Poor of the Parish of

DATED this fifteenth day of April One thousand nine hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned William A Parker
hereby certify that I have this day at (1) Gartloch Asylum
personally examined William Little who has been a
Patient in said Asylum since (2) March 22nd 1902 and I certify that
the said Patient is a person of unsound mind, (3) is not epileptic, (3) is not suicidal,
(3) it is not dangerous to others. I also certify, with respect to the Mental State of
the Patient, that (4) he is somewhat dull + depressed
and is often sleepless at night. On admission
he gave expression to delusions of persecution
& he still has hallucinations of hearing especially at
and with respect to the Bodily State of the Patient, that (5)
it is fairly good

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Crichton Royal Institution ~~Asylum~~ inadvisable; and I further certify that (6) there are no facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient:—

(1) Name Asylum.

(2) Insert Date of Admission.

(3) Insert "is," or "is not," as the case may be.

(4) Describe Mental State.

(5) Describe Bodily State.

(6) Insert "the following are," or "there are no," as the case may be.

(Signature) W. A. Parker.

(Medical Qualification) M.B. C.M. Glasgow

(Date) April. 12. 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer

of William Little
from Glasgow District Asylum, Gartloch
to Crichton Royal Institution, Dumfries

and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

J. W. L. Scott

Secretary.

DATED at Edinburgh, this 16th day of April One thousand nine hundred and two.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

24th March 1902.

No. 8840.
William Little
(Gartloch)
Adm: 24 April 1902.

16,145.

[FORM B]

GENERAL BOARD OF LUNACY
24 APR 1902
SCOTLAND

25 *and* 26 *Vict. Cap.* 54, *Sect.* 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I the undersigned Charlotte Clarke Whyte
being desirous to transfer Alexander Macdonald Whyte
at present a Patient in Inverness District Asylum and (1) detained at my instance from the said Asylum to the Crichton Royal Institution

(1) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Alexander Macdonald Whyte
2. Sex and Age,	Male. 19 Years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Clerk.
5. Religious Persuasion, so far as known,	Protestant.
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	—
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	David Whyte. (Father) 4 Ardross Street. Inverness. His mother's first cousin, and his mother's stepbrother were insane.

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(*To be signed by the Applicant*) Charlotte Clarke Whyte

(2) Stepmother.

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 18th day of April One thousand ~~eight~~ nine hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

T. & A. C.—May 1898.

MEDICAL CERTIFICATE.

I, the undersigned John Keay

(1) Name Asylum.

hereby certify that I have this day at (1) the Inverness District Asylum, personally examined Alexander Macdonald Whyte who has been a

(2) Insert Date of Admission.

Patient in said Asylum since (2) 8th April. 1902 and I certify that

(3) Insert "is," or "is not," as the case may be.

the said Patient is a person of unsound mind, (3) is not epileptic, (3) is not suicidal, (3) and is not dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State.

the Patient, that (4) he is enfeebled in mind and slightly exalted; is restless and unsettled, and has exaggerated ideas of his abilities and accomplishments

(5) Describe Bodily State.

and with respect to the Bodily State of the Patient, that (5) they are it is indifferent. He is thin and anaemic and is deaf on the left side from chronic suppurative disease of the middle ear.

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Crichton Royal Institution Asylum inadvisable; and

(6) Insert "the following are," or "there are no," as the case may be.

I further certify that (6) there are no facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient.

(Name) John Keay

(Medical Qualification) M.D. L.R.C.P.E.

(Date) 19th April 1902

No. 8841.
Alexander Macdonald Whyte.
Adm: 8th April 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer

of Alexander Macdonald Whyte

from Inverness District Asylum

to Crichton Royal Institution, Dumfries,

and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

W L Mence Secretary ~~Commissioner~~

DATED at Edinburgh, this 22nd day of April One thousand ~~eight~~ Nine hundred and two.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

9th April, 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Counties of Dumfries & Galloway and his Substitutes,

The Petition of Alex. Baig Insp. of Poor for the Parish of Dalbeattie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Stewart Pauper your Petitioner's (3)

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Stewart to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Alex. Baig

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 27 (4) day of April One thousand eight hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Stewart
2. Sex and Age,	Male 47 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Clerk formerly Constable, Scotstaun Motherwell
5. Religious Persuasion, so far as known,	Drumflower Dumfriesshire
6. Previous Place of Abode,	Five weeks
7. Place where Found and Examined,	No
8. Length of time Insane,	at 36 years of age.
9. Whether First Attack,	at Motherwell treated at Dumfries.
10. Age (if known) on First Attack,	Five weeks
11. When and where previously under Examination and Treatment (5)	Unknown
12. Duration of Existing Attack,	No
13. Supposed Cause,	Doubtful
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	Dalziel. (supposed)
16. Whether Dangerous to others,	Jane Patrick (wife) 1 Bridge St. Motherwell
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	His father was insane
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an asylum, state date of latest and approximate if incorrect. If previously under examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty seventh day of April One thousand eight hundred and two years

(*To be signed by the party applying*) Alex. Baig

T. & A. C.—Nov. 1896

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Matthews
being a (1) Bachelor of Medicine & Master of Surgery
Universty of Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Drumsloe
Dunragit
Wigtown in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Stewart, Pauper
and that
the said William Stewart is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He has an insane address & countenance, talks incoherently, says he would like rest in death for himself and his wife, that the high shoes are going above to prepare for them &c &c

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His brother states that he is very restless that he requires to be watched continually that he is violent, & knocked him down on &c &c &c

Name and Medical Designation, David Matthews M.B.

Place of Abode, Glenluce

DATED this twenty seventh day of April One thousand eight hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Dalrymple Munro
being a (1) Bachelor of Medicine & Master of Surgery of
Aberdeen Universty
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Drumsloe
Dunragit
Wigtown in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Stewart — Pauper
Drumsloe —
and that
the said William Stewart is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is restless and excited — His conversation is incoherent He says great misfortune is coming to him and he wants to escape from it by death.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mr Frederick informed me he was very excited last night and had struck his brother That some days he was restless & threatening & becoming worse. He had been in an asylum

Name and Medical Designation, D Dalr Munro MB

Place of Abode Stranraer

DATED this twenty seventh day of April One thousand eight hundred and two —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Allan Thomson Watson Esquire(1) Honorary Sheriff Substitute of the (2) Sheriffdom of Dumfries and Galloway having had produced to me, with a Petition at the instance of (3) A McCaig Inspector of Poor for the Parish of Old Luce Certificates under the hands of David Matthews M.B.C.M. and David Duthie Munro M.B.C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Stewart Pauper Drumflar and that the said William Stewart is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Stewart as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Stewart which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Stranraer] this 27th day of April One thousand ~~eight~~ nine hundred and two

To the Superintendent of the (7)
Southern Counties *Asylum of* Dumfries

[*Signature*] Allan Thomson Watson

(7) Public, District, Parochial, or Private.

A.D.S. X

No. 8842.

William Stewart.

(Old Luce)

Adm: 28 April 1902.

N.B.—*This Form shall be used, in the keeping of the Register of the Asylum, in the case of an order of the Sheriff and no other.*

[FORM A.]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries & Galloway.

and his Substitutes,— at Dumfries:

The Petition of Mrs. Marion Coulter. Londonderry House, Comber, Co. Down. Ireland.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates that Thomas Coulter, Cattle Dealer, Catlogo, Comber, Co. Down,

(1) State degree of relationship, or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (1) Husband,— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Thomas Coulter, ——— to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(To be signed by the Party applying) Marion Coulter.

(2) No date of the Petition should be within fourteen clear days following the dates of the Medical Certificate.

DATED this Thirtieth (2) day of April, —One thousand eight hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Thomas Coulter.
2. Sex and Age,	Male. 55 years.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	Cattle dealer.
5. Religious persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Catlogo, Comber, Co Down.
7. Place where Found and Examined,	Catlogo.
8. Length of Time Insane,	10 days.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	Never.
12. Duration of Existing Attack,	10 days.
13. Supposed Cause,	overwork.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Marion Coulter, Londonderry House Comber, Co. Down. - Wife. none.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this 28th day of April, — One thousand ~~eight~~ nine hundred and ~~two~~ two.

(To be signed by party applying) Marion Coulter.

Gillison & Sharp
No 888

MEDICAL CERTIFICATE No. I.

I, the undersigned Robert Henry, being a (1) Graduate of the Royal University of Ireland, and being in actual practice as a (2) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) Comber, in the County of Down, separately from any other Medical Practitioner, visited and personally examined (4) Thomas Coulter, Cattogs Comber, and that the said Thomas Coulter, is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) he is an ex- state imagines he has unlimited means is going to buy some thousands of shares in Injection Co. & is go- ing to build a temple & hand it over to Rev D. Taylor the when at church & himself singing 40 Salvation hymns he would have to bless them & dis-

2. Other facts (if any) indicating Insanity communicated to me by others: (7) same as above

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house, (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

Name and Medical Designation, Place of abode, Robert Henry M.D. Comber Co Down

DATED this 27th — day of April — One thousand nine ~~eight~~ hundred and two.

MEDICAL CERTIFICATE No. II.

I, the undersigned James. S. Steele, being a (1) Licentiate of the Royal College of Phys & Surgeons, Edinburgh, and being in actual practice as a (2) Physician & Surgeon, hereby certify, on soul and conscience, that I have this day, at (3) Cattogs, Combers, in the County of Down, separately from any other Medical Practitioner, visited and personally examined (4) Thomas Coulter Cattogs, Combs, and that the said Thomas Coulter, is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is very ex- thinks he owns far more than he really does with a great tendency to make foolish speculations

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Buying land at two or 3 prices & talking about building churches.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts*

(7) *State the information and from whom derived.*

Name and Medical Designation, Place of abode, James S. Steele L.R.C.P. & S. Edin. Comber Co Down

DATED this 28th — day of April, — One thousand nine ~~eight~~ hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned Robert Henry, being (1) a graduate of the Royal University in Ireland (1) State medical qualification. hereby certify, on soul and conscience, that I have this day, at (2) Lathgo, Comber, (2) State place of examination. in the County of Down, seen and personally examined Thomas Coulter, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries. And I further certify that the case of the said person is one of Emergency.

Robert Henry M.D.

DATED, this 28th day of April, One thousand ~~eight~~ hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Thomas Coulter, to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Wife.

Signature and Address, Marion Coulter. Londonderry House Comber. Co. Down.

Date, 30th April 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary, Sheriff Substitute of ~~the the County of~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Mrs Marion Coulter, Londonderry House, Comber, County Down, Ireland, (1) Insert Name & Designation Certificates under the hands of Robert Henry and James S. Steele, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Thomas Coulter, Cattle Dealer, Lathgo, Comber, Co. Down, (Petn's Husband), and that the said Thomas Coulter is a (3) Lunatic, and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Thomas Coulter as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize his Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Coulter, which accompanied the said Petition.

(2) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this First day of May, One thousand ~~eight~~ nine hundred and ~~two~~ years. Nine printed words deleted.

Jn. Clerk

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8843.

Name, Thomas Coulter.

Date of Admission, 30 April 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the Stewartry of Galloway and his Substitutes—

The Petition of Hastening Sinclayton Inspector of Poor of Kirkcudbright

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John McNaught your Petitioner's (2) pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John McNaught to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(*) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Hast Sinclayton

(*) The date of the Petition must be within a fourteen clear days following the dates of the Medical Certificates.

DATED this 5th (*) day of May One thousand eight hundred and five hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John McNaught
2. Sex and Age,	Male (45)
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Scavenger
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	St Cuthbert St Kirkcudbright
7. Place where Found and Examined,	St Cuthbert St Kirkcudbright
8. Length of time Insane,	four weeks
9. Whether First Attack,	No
10. Age (if known) on First Attack,	(?)
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*].	St Ayslum Dumfries
12. Duration of Existing Attack,	four weeks
13. Supposed Cause,	Hereditary
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if Pauper) is Chargeable,	Kirkcudbright
18. Date of becoming Chargeable,	4th May 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wife Janet McNaught St Cuthbert St Kirkcudbright
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 5th day of May One thousand eight hundred and five hundred and two

(*To be signed by the party applying*) Hast Sinclayton

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
(3) *Insert the street, and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Wm Johnstone
being a (1) M. D. of Edin.
and being in actual practice as a (2) general practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) St Cuthberts
Kirkcudbright — in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) John McNaught - pauper and that
the said John McNaught is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1 Facts indicating Insanity observed by myself: (6) That he is
subject of fits of depression and excitement
afraid of injuring himself.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his wife states that yesterday he
almost strangled himself and was
unconscious for a time.

Name and Medical Designation, Wm Johnstone
Place of Abode, Kirkcudbright
DATED this 5th day of May One thousand eight
hundred and 2

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Wm Swanston Spence Reid
being a (1) M B: C M: of Edinburgh & Licentiate of
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) St Cuthberts
Kirkcudbright in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) John McNaught
Pauper and that
the said John McNaught. is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
That he is very depressed in mind & cannot
sleep. He is subject to fits of extreme excite

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mr Finlayson Inspector of Poor told me that
yesterday he attempted to strangle himself
with his handkerchief (neck)

Name and Medical Designation, W S Reid
Place of Abode Oakley - Kirkcudbright
DATED this 5th day of May One thousand eight
nine hundred and two -

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, }

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lawrence Yeoryman Napier (1) Sheriff Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) Frederick Vinlayson
Certificates under the hands of W. S. S. Reid
and William Johnstone, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
John McNaught
and that the said John McNaught is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John McNaught as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John McNaught which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED this Fifth day of May One thousand ~~eight~~ nine hundred and two

Lawrence T. Napier

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

(7) Public, District, Parochial, or Private.

No. 8844

John McNaught

(Kirkcudbright)

Adm. 5th May 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Lanark and *his Substitutes*

The Petition of Alex Markle Inspector of Poor Lowell Parish, Glenchan & Stonrae

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Susan Duncan McLauchlin 11 Newpark Avenue, Glasgow your Petitioner's (3) Pauper Lunatic is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Susan Duncan McLauchlin to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Alex Markle

(4) The date of the Petition must be within fourteen clear days ~~eight~~ following the dates of the Medical Certificates.

DATED this Sixth (4) day of May One thousand nine hundred and two years

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Susan Duncan McLauchlin
2. Sex and Age,	Female Aged 25 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Housewife
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	11 New Park Avenue Glasgow
7. Place where Found and Examined,	do
8. Length of time Insane,	A few days
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	25 Yrs
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*].	Crichton Royal Institution 1902
12. Duration of Existing Attack,	A few days
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Nor
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lowell Parish Council
18. Date of becoming Chargeable,	7th May 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Husband John McLauchlin 11 New Park Avenue Glasgow None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Sixth day of May One thousand nine hundred and two years

(*To be signed by the party applying*) Alex Markle

P. p.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Carswell being a (1) Licentiate of the Royal College of Physicians Edinburgh and of the Faculty of Physicians & Surgeons, Glasgow, and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 11 Viewpark Avenue, Glasgow, in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) Susan Duncan or McLauchlan residing there, Pauper and that the said Susan Duncan or McLauchlan is a (5) Person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is restless, excited & foolish in conduct; is quite incoherent in her talk; and she is also irrational and delusive in her ideas.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband states that she is sleepless and restless at night, and frequently becomes very excited & unmanageable.

Name and Medical Designation, J. Carswell L.R.C.P.S.Edr

Place of Abode, 5 Royal Crescent Glasgow

DATED this 5th day of May One thousand ~~eight~~ nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Cullen being a (1) M.D of Glasgow University and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 11 Viewpark Ave Glasgow Lanark. in the County of separately from any other Medical Practitioner, visited and personally examined (4) Susan Duncan or McLauchlan residing there, Pauper and that the said Susan Duncan or McLauchlan is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Vacant Expression of face no memory or Comprehension of any sort. Cannot even tell her age has some indefinite delusion about Balmoral Castle. Sings and Chatters a foolish and unmeaning fashion - Is quite incapable of acting for herself

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Husband cannot leave her, he says, from her tendency to run outside & wander -

Name and Medical Designation, William Cullen M.D

Place of Abode 9 Grafton Place

DATED this 5th day of May One thousand ~~eight~~ nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Carswell being (1) a Licentiate of the Royal College of Physicians Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) 11 Viewpark in the County of Lanark, seen and personally examined Susan Duncan or McLauchlin, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum, and is in a sufficiently And I further certify that the case of the said person is one of Emergency. Good state of bodily healthy at this date to be removed to the asylum at Dumfries.

(1) State medical qualification.
(2) State place of examination.

J. Carswell L.R.C.P. Edr

DATED this 5th day of May One thousand eight nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Susan Duncan or McLauchlin to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Removing Officer

Signature and Address Donald McKechnie 78 John St Glasgow

Date 5th May 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William George Scott Marcus (1) Sheriff Substitute of the (2) County of Lanark having had produced to me, with a Petition at the instance of (3) Alexander Meikle Inspector of Poor, Tearvalt Parish, Stranraer Certificates under the hands of John Carswell and William Mullen, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Susan Duncan or McLauchlin 11 Viewpark and that the said Susan Duncan or McLauchlin is a (5) Person of unsound mind, a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Susan Duncan or McLauchlin as a Patient into the Crichton Royal Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Susan Duncan or McLauchlin which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED this Seventh day of May One thousand nine hundred and two years.

W G Scott Marcus

To the Superintendent of the (6)
Crichton Royal Institution Dumfries.

(6) Public, District, Parochial, or Private.

No. 8845.

Susan Duncan McLauchlin
(Seawalk)

Adm: 5 May 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (1) Dumfries & Galloway, *and his Substitutes,—at* Dumfries:

The Petition of Miss Isabella Deborah Wearing, Kirkby Lonsdale, Westmoreland:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Richard Hodgson Wearing, —

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Brother, _____ is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Richard Hodgson Wearing, — to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Isabella Deborah Wearing

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 13th ~~8th~~ (3) day of May, — One thousand ~~nine~~ hundred and 1901. two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Richard Hodgson Wearing.
2. Sex and Age,	Male - 57 -
3. Married, Single, or Widowed,	Single -
4. Condition of Life, and previous Occupation (if any),	no occupation, formerly Chemist.
5. Religious Persuasion, so far as known,	Church latterly Congregational Chapel.
6. Previous Place of Abode,	Liverpool, London, longest, Kirkby Lonsdale.
7. Place where Found and Examined,	Kirkby Lonsdale.
8. Length of time Insane,	Never done any thing for over 20 years.
9. Whether First Attack,	Yes Came on very gradually.
10. Age (if known) on First Attack,	about 24.
11. When and where previously under Examination and Treatment (5)	Never.
12. Duration of Existing Attack,	Since second accident.
13. Supposed Cause,	A fall from a great height when a boy, some years afterwards knocked down - fell on his head.
14. Whether subject to Epilepsy,	not.
15. Whether Suicidal,	not.
16. Whether Dangerous to others,	not.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	I. D. Wearing, Kirkby Lonsdale. Westmoreland. sister. Never.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If the Lunatic has been only in an Asylum, state the date of latest admission or appointment. If only under Medical Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 13th day of May, — One thousand nine hundred and ~~one~~ two years.

(To be signed by the party applying) Isabella Deborah Wearing

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Wyllie ——— being a (1) Doctor of medicine and Master in Surgery of the University of Glasgow ——— and being in actual practice as a (2) Physician and Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) 6 Main St Kirkby Lonsdale ——— in the County of Westmoreland ——— separately from any other Medical Practitioner, visited and personally examined (4) Richard Hodgson Wearing, Gentleman, 6 main St., Kirkby Lonsdale, and that the said Richard Hodgson Wearing is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Vacant expression. Does not care to enter into conversation. Manners childish and silly. Intelligence and judgment greatly lessened and mind altogether feeble.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Has many delusions (eg) that the plants in the window are the cause of his baldness. Has paroxysms of violence in which he threatens injury to his sisters. Will not walk about the bedroom all night and moves the furniture. No sympathy with others. Is very idiotic in his ways.

Informants
Isabella Deborah Wearing
Sister of
Richard Hodgson Wearing.

Name and Medical Designation, William Wyllie M.D. Glasgow

Place of Abode, Kirkby Lonsdale

DATED this Sixth — day of May — One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson ——— being a (1) Doctor of medicine of Glasgow University and Surgeon ——— and being in actual practice as a (2) Physician and Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution ——— in the County of Dumfries ——— separately from any other Medical Practitioner, visited and personally examined (4) Richard Hodgson Wearing, no occupation, 6 Main St, Kirkby Lonsdale, and that the said Richard Hodgson Wearing, is a (5) person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His general appearance - Stares around in a vacant manner, and talks in a silly and incoherent manner about his affairs. And the state of his body; and more particularly as to the cause of his baldness, about which he has many peculiar views -

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D

Place of Abode, 27 Carlyle Street, Dumfries

DATED this Thirteenth day of May — One thousand nine hundred and two years. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, William Wyllie being (1) a Doctor of Medicine of the University of Glasgow hereby certify, on soul and conscience, that I have this day, at (2) Kirkby Lonsdale, in the County of Westmoreland, seen and personally examined Richard Hodgson Wearing, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

William Wyllie

DATED this Sixth day of May, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution ~~Asylum~~ to receive therein Richard Hodgson Wearing, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister

Signature and Address I D Wearing Kirkbylonsdale

Date 13 May 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampion, Esquire Advocate, Sheriff Substitute of the (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition, at the instance of (2) Miss Isabella Deborah Wearing, Kirkby Lonsdale, Westmoreland, Certificates under the hands of William Wyllie and Alex: Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Richard Hodgson Wearing, of Mansion House Kirkby Lonsdale Westmoreland and that the said Richard Hodgson Wearing is a person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Richard Hodgson Wearing as a patient into the (4) Public Asylum of Crichton Royal Institution, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Richard Hodgson Wearing, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(4) Public, District, Parochial, or Private.

DATED [at Dumfries] this Thirteenth day of May, One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(5) Public, District, Parochial, or Private.

[Signature] Geo: Lampion

No 8846.
Richard Hodgson Hearing.
Adm: 18 May 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Dumfries and Galloway, and his Substitutes,—

The Petition of John Maxwell, Inspector of the Poor for the Parish of Drogheer.—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Dowd. 65 College Street, your Petitioner's (3) Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Dowd to the Southern Counties Asylum, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) John Maxwell

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twelfth (4) day of May, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Dowd,
2. Sex and Age,	Female, aged about 71 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Working Class. Housewife
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	65, College St. Maxwelltown
7. Place where Found and Examined,	same place.
8. Length of time Insane,	about a fortnight
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	about 71 years.
11. When and where previously under Examination and Treatment (5)	Never under Treatment before
12. Duration of Existing Attack,	about a fortnight
13. Supposed Cause,	not Known.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Drogheer.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Husband Michael Dowd resides at above address. Has two Daughters patients in the Asylum.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

(5) If earliest has previously in an Asylum, state date of latest or approximate. If previously under Treatment or treatment unknown, so state.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of May One thousand nine hundred & two years

(*To be signed by the party applying*) John Maxwell

T. & A. C.—Jan. 1900. P p

Richard Anderson Esquire

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Patrick Murray ——— being a (1) Graduate of Edinburgh University, ——— and being in actual practice as a (2) Physician, ——— do hereby certify, on soul and conscience, that I have this day, at (3) 65 College Manchestown Dublin ——— in the County of Dublin ——— separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Dowd, Pauper 65 College St Manchestown ——— and that the said Elizabeth Dowd ——— is a (5) Person of unsound mind ——— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) great incoherence of speech & rattles mutt- lips are not closed in talk - says things are bloody another day all is detail.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her daughter told me that she refuses her food, & should not eat day, that she appears to be hearing voices.

Name and Medical Designation, Patrick Murray M

Place of Abode, 65 College St Dublin

DATED this tenth day of May, — One thousand nine hundred & two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Dewar Robson ——— being a (1) Graduate of Edinburgh University, ——— and being in actual practice as a (2) Physician, ——— do hereby certify, on soul and conscience, that I have this day, at (3) 65 College Manchestown Dublin ——— in the County of Dublin ——— separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Dowd, pauper 65 College St Manchestown, Dublin and that the said Elizabeth Dowd ——— is a (5) person of unsound mind, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is incoherent in speech. She imagines she has swallowed needles which are piercing her heart. She believes that everything she sees is covered with blood & pins are burning about her. When seen by me she was creeping over the bed, trying to allow the pins

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her daughter informed me that she refuses to take her food, and that she has to be up night & day in case she gets out of bed and wanders about

Name and Medical Designation, John Dewar Robson

Place of Abode 7 Leeson St Manchestown

DATED this twelfth — day of May — One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the (1) Dumfries & Galloway at Dumfries having had produced to me, with a Petition at the instance of (2) John Maxwell, Inspector of Poor, Crogdler, Maxwelltown Certificates under the hands of Patrick Mowray, and John Dewar Robeson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Dowd, Cobbler's Wife, Maxwelltown a Pauper and that the said Elizabeth Dowd is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Dowd as a patient into the (6) Public Asylum of Southern Counties and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Dowd, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twelfth day of May One thousand nine hundred and two years.

To the Superintendent of the (7) Public Asylum of Southern Counties at Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No 8844

Elizabeth Dowd.

(Spinster)

Adm. 12 May 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Ayr *and his Substitutes,—*

The Petition of Charles Currie 8 Barns Crescent Ayr

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Currie your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Charles Currie to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Charles Currie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 13th (4) day of May One thousand nine hundred and two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Charles Currie
2. Sex and Age,	male 42 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Grocer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	8 Barns Crescent Ayr
7. Place where Found and Examined,	" " "
8. Length of time Insane,	unknown
9. Whether First Attack,	"
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	He never was under examination or treatment before
12. Duration of Existing Attack,	unknown
13. Supposed Cause,	Indigestion & depression of Spirits
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	I dont know
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Charles Currie 8 Barns Crescent Ayr Father no
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) Patient has previously in an Asylum, state Asylum of latest admission or application. If previously under Treatment or treatment before.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 13th day of May One thousand nine hundred and two

(To be signed by the party applying) Charles Currie

C. & A. C.—Jan. 1900. P p

ex 8214 Elizabeth Ward.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Ritchie Burns being a (1) M.B., C.M. of Glasgow University and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 8 Burns Crescent, Ayr in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Charles Currie, retired Grocer 8 Burns Crescent, Ayr and that the said Charles Currie is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Before I had time him a question, he began by asking me what I h to this house to plot against him. He also said the lot of people besides you who are trying to trap me. He excited, quite incoherent & suspicious of those around hi

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His f me that last night while in bed he alarmed the shouting out wildly, Murder! Murder! & when he (the f went up to enquire for him he accused him of com murder him. His sister informed me also that he suspe of putting poison in his tea

Name and Medical Designation, J. Ritchie Burns M.B.,

Place of Abode, 8 Burns Street, Ayr

Dated this 12th day of May One thousand nine hundred & two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be,*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Moore being a (1) M.B., C.M. Glasg. and being in actual practice as a (2) General practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 8 Burns Cr Ayr in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Charles Currie, Grocer, 8 Burn Crescent, Ayr and that the said Charles Currie is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is maniacal excited, shouting & yelling & talking incoher he has delusions of persecution & imag that his father & brother wish to poison kill him

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His says that he has been very excited & th Virginia himself more than usual, that [illegible] thinks that people are going to kill him

Name and Medical Designation, Will. Moore M.

Place of Abode 1 Eglinton Terrace,

Dated this 12th day of May One thousand nine hundred & two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, _____

Signature and Address _____

Date _____

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Mr John Campbell Shairp Esq younger of Lochcraig Sheriff of Substitute
of the (1) County of Ayr
having had produced to me, with a Petition at the instance of (2) Charles
Currie 8 Burns Crescent Ayr
Certificates under the hands of J Ritchie Burns MB Ch
and Will Moore MB Ch being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Charles Currie, the Pur and that the said
Charles Currie (Pur) is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charles Currie (Pur), as a patient into the (6) Royal Edinburgh Asylum of Royal Edinburgh Asylum Morningside and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Charles Currie (Pur) which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Ayr] this 13th day of May
One thousand nine hundred two.

To the Superintendent of the (7)
Asylum of
Crichton Royal Institution
Dumfries

J. C. Shairp
[*Signature*] _____

(7) Public, District, Parochial, or Private.

No. 8848.
Charles Curtis.
Adm: 13 May 1902.

25 and

APPLICATION TO THE G
TRANSFER OF A PA

I, the undersigned Dum
being desirous to transfer Ch
present a Patient in Ro
whom meant Know
Crichton Roy
Dumfr

ng to submit the subjoined Sta
dical Certificate with respect t

STATEM

1. Christian Name and Surname
length, . . .

2. Sex and Age, . . .

3. Married, Single, or Widowed,

4. Condition of Life, and Previous
(if any), . .

5. Religious Persuasion, so far as

6. Parish to which the Lunatic (if
Chargeable, . .

7. Christian Name and Surname
of Abode of nearest known
the Patient, and degree of
(if known), and whether an
the Family known to be, or
Insane, . . .

I certify that, to the best o
and I hereby make Application
Lunacy to the transfer of the pa

(To be signed by the Ap

Dated this Sixth d
hundred and two

N.B.—The foregoing partic
follows, are required for the int
to which the Patient is to be t

B. & C.—January 1894.

16,166.

[FORM B²]

25 *and* 26 *Vict. Cap.* 54, *Sect.* 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned Duncan MacGillivray being desirous to transfer Charles MacGillivray at present a Patient in Lochgilphead Asylum (¹) whose nearest known relative I am Crichton Royal Institution from the said Asylum to the Dumfries

beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

(¹) If Lunatic is not a Pauper, insert "detained at my instance," *or* "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Charles MacGillivray
2. Sex and Age,	Male 52
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	good Marine Engineer
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	—
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	Duncan MacGillivray East Cliff Campbeltown Argyleshire.

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(*To be signed by the Applicant*) Duncan MacGillivray.

(²) Brother

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this Sixth day of May One thousand ~~eight~~ nine hundred and two

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

T. & A. C.—January 1898.

MEDICAL CERTIFICATE.

I, the undersigned John Cameron

(1) Name Asylum. hereby certify that I have this day at (1) Argyll and Bute Asylum Lochgilphead personally examined Charles Mac Callum who has been a

(2) Insert Date of Admission. Patient in said Asylum since (2) 28th December 1900 and I certify that

(3) Insert "is," or "is not," as the case may be. the said Patient is a person of unsound mind, (3) is not epileptic, (3) is not suicidal,

(3) is dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State. the Patient, that (4) he suffers from Chronic Mania, is subject to

hallucinations, mistakes the identity of those about him

and hears imaginary voices. If it is,

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5) the patient is feeble & ~~strong~~ for

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Dumfries Asylum inadvisable; and

(6) Insert "the following are," or "there are no," as the case may be. I further certify that (6) the following are facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient:—

He has on three occasions assaulted attendants and has frequently threatened violence

(Name) J. Cameron

(Medical Qualification) M.D.

(Date) 26th April 1902

No. 8849
Charles MacCallum
Adm. 13 May 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer of Charles MacCallum from Argyll & Bute District Asylum to Crichton Royal Istitution, Dumfries, and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

W. D. Kennedy Secretary ~~Commissioner~~

DATED at Edinburgh, this 8th day of May One thousand ~~eight~~ nine hundred and two.

Date of Sheriff's Order *(to be inserted at the Office of Board).*

29th December 1900.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[FORM A]

25 and 26 *Vict., Cap.* 54, *Sec.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES MCINNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Janet Charteris your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Charteris to the Crichton Royal Institution at Dumfries, and to sanction her admission into the said Institution.

(To be signed by the Party applying) Miles Mc Innes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fourteenth — (*) day of May One thousand ~~eight~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Janet Charteries
2. Sex and age,	Female — 27
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Charwoman
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	Dumfries Poorhouse
7. Place where found and examined,	Dumfries Poorhouse
8. Length of time Insane,	a few days
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	27
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	no where
12. Duration of Existing Attack,	not known
13. Supposed Cause,	not known
14. Whether Subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	13th May 1902 (as a Lunatic)
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth — day of May — One thousand ~~eight~~ nine hundred and two years.

(To be signed by the party applying) Miles Mc Innes

MEDICAL CERTIFICATE, NO. I.

(*) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case maybe.*

(*) *Insert the Street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Peter Murray Kerr being a (*) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and being in actual practice as a (*) General Practitioner do hereby certify, on Soul and Conscience, that I have this day, at (*) Poorhouse Dumfries. Dumfries in the County of separately from any other Medical practitioner, visited and personally examined (*) Janet Charteris pauper Poorhouse Dumfries and that the said Janet Charteris is a (*) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(*) *State the facts.*

1. Facts indicating Insanity observed by myself: (*)

Her insane appearance and manner she is an imbecile. is violent at times has quantities of control. has delusions as to her wealth and the ones in the poorhouse

(*) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (*)

Name and Medical Designation, Peter Murray Kerr M.B.C.M.

Place of Abode, 20 Castle Street Dumfries

DATED this Thirteenth day of May One thousand ~~eight~~ hundred and nine years

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MEDICAL CERTIFICATE, NO. II.

(*) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the Street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Robert Livingston being a (*) Bachelor of medicine and master in Surgery of Edinburgh University and being in actual practice as a (*) Physician and Surgeon do hereby certify, on Soul and Conscience, that I have this day, at (*) Crichton Royal Institution Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (*) Janet Charteris pauper Crichton Royal Institution Dumfries and that the said Janet Charteris is a (*) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(*) *State the facts.*

1. Facts indicating Insanity observed by myself: (*)

Her insane appearance & manner Her rambling incoherent conversation

(*) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (*)

Name and Medical Designation, George R. Livingston M.B.C.M.

Place of Abode, 35 George Street Dumfries

DATED this Fourteenth day of May One thousand ~~eight~~ hundred and nine years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr being (1) Graduate in Medicine hereby certify, on Soul and Conscience, that I have this day, at (2) Poorhouse Dumfries in the County of Dumfries, seen and personally examined Janet Charteris, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum. ✱

(1) State Medical qualification.
(2) State place of Examination.

And I further certify that the case of the said person is one of Emergency. and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr

Dated this Thirteenth day of May One thousand ~~eight~~ hundred and two years

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein Janet Charteris to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address, Miles Mc Innes, 28 Queen Street, Dfs.

Date, 13th May, 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate Sheriff-Substitute of ~~the County of~~ Dumfries and Galloway, at Dumfries. having had produced to me, with a Petition at the instance of (1) Miles Mc Innes, Inspector of Poor, Dumfries Certificates under the hands of Peter Murray Kerr and George Robert Livingston, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Janet Charteris, Poorhouse, Dumfries (a pauper) and that the said Janet Charteris is a (3) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Charteris as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise her Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Janet Charteris which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

Dated this Fourteenth day of May One thousand ~~eight hundred and~~ nine hundred and two years.

Five words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo. Campion

No. 8880.

Name. Janet Charteris
(Dumfries)

Date of Admission. 13 May 1908.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[FORM A]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Agnes Johnston your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Johnston to the Crichton Royal Institution at Dumfries, and to sanction her admission into the said Institution.

(To be signed by the Party applying) Miles McInnes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fourteenth (*) day of May One thousand ~~eight~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Agnes Johnston
2. Sex and age,	Female, 41
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Housewife
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	20 Church Crescent
7. Place where found and examined,	20 Church Crescent
8. Length of time Insane,	about a month
9. Whether First Attack,	no - Third
10. Age (if known) on First Attack,	not known
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Crichton Royal Asylum
12. Duration of Existing Attack,	not known
13. Supposed Cause,	not known
14. Whether Subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	13th May, 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Johnston Farm Servant, Templand Hill, Kirkmahoe, Brother one brother in Asylum just now
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth day of May One thousand ~~eight~~ nine hundred and two years.

(To be signed by the party applying) Miles McInnes

Agnes Daniels Crichton (Married)

MEDICAL CERTIFICATE, NO. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George Robert Livingston being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University & Surgeon and being in actual practice as a (2) Physician & Surgeon do hereby certify, on Soul and Conscience, that I have this day, at (3) 20 Church Crescent Dumpie in the County of Dumpie separately from any other Medical practitioner visited and personally examined (4) Agnes Johnston Pauper 20 Church Crescent Dumpie and that the said Agnes Johnston is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance and manner She wanders about the room wringing her hands and talking in an incoherent manner When asked to sit down says "She will never sit down till she is in heaven"

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, George R. Livingston M.B. C.M.

Place of Abode, 36 George Street Dumpie

DATED this Nineteenth day of May One thousand nine hundred and two.

MEDICAL CERTIFICATE, NO. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Peter Murray Kerr being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and being in actual practice as a (2) General Practitioner do hereby certify, on Soul and Conscience, that I have this day, at (3) 20 Church Crescent Dumpie in the County of Dumpie separately from any other Medical Practitioner, visited and personally examined (4) Agnes Johnston, pauper 20 Church Crescent Dumpie and that the said Agnes Johnston is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance and manner. She refuses to answer any reasonable question. She sits wringing her hands looks unspeakable

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M.B.

Place of Abode, 20 Castle Street Dumpie

DATED this Nineteenth day of May One thousand nine hundred and two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr being (1) Graduate in Medicine hereby certify, on Soul and Conscience, that I have this day, at (2) 20 Church Crescent Dumfries, in the County of Dumfries, seen and personally examined Agnes Johnston, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum.

(1) State Medical qualification.
(2) State place of Examination.

And I further certify that the case of the said person is one of Emergency.

and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr

Dated this Fourteenth day of May One thousand eight hundred and two years

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein Agnes Johnston to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address, Miles McJones 28 Queen Street, Dfs.

Date, 13th May, 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute of ~~the County of~~ Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of Miles McJones, Inspector of Poor, Dumfries, Certificates under the hands of George Robert Livingston, and Peter Murray Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (1) Agnes Johnston, 20 Church Crescent Dumfries a pauper, and that the said Agnes Johnston is a (2) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Johnston as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Agnes Johnston which accompanied the said Petition.

(1) Insert Name and Designation.

(2) Describe him, or if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

Dated this Fourteenth day of May One thousand ~~eight hundred~~ and nine hundred and two years.

Five words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8881.

Name. Agnes Johnston

Date of Admission. 13 May 1902.

S.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~of the (2) County~~ of Dumfries & Galloway, and his Substitutes,—

The Petition of Sarah McNeil. Springfields Cottage, Borgue, Kirkcudbright.

humbly sheweth that it appears from the subjoined Statement, and accompanying Medical Certificates, that William Dalziel McNeil, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Dalziel McNeil, — to the Crichton Royal Institution, — and to sanction the admission into the said Asylum.

(*To be signed by the Party applying*) Sarah Mc Neil +

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Second (4) day of May — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Dalziel McNeil.
2. Sex and Age,	Male. 25.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	None.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Springfields Cottage, Borgue.
7. Place where Found and Examined,	do do
8. Length of time Insane,	Breakings from birth.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Since birth.
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	After 12th, if crossed.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mother. Sarah McNeil, Springfields Cottage, Borgue, Kirkcudbright. None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under examination or treatment, state fact.

I certify, that to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty Second day of May — One thousand nine hundred and two years.

(*To be signed by the party applying*) Sarah Mc Neil +

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, C. Granville Hay M.B. Master in Surg
being a (1) Bachelor of Medicine & Master in Surg
of Edinburgh University,
and being in actual practice as a (2) General Medical practitio
do hereby certify, on soul and conscience, that I have this day, at (3) Springfie
Cottage, Borgue,
Kirkcudbright — separately from any other Medical Practitio
visited and personally examined (4) William Dalziel McNeil,
of —— and
the said William Dalziel McNeil — is a (5) person
of unsound mind — and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He is the subject of Hallucinations

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His friends inform me that he com
everything said to him with religion &
into forcible & demonstrative argume
on religious subjects in a most disconne

Name and Medical Designation, C. Granville Hay MB,

Place of Abode, C/o D. Reid, Oakley, Kirkcud

DATED this twenty first day of May — One thou
nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson —
being a (1) Doctor of Medicine of Glasgow
University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The
Crichton Royal Institution — in the Count
Dumfries, separately from any other Medical Practitio
visited and personally examined (4) William Dalziel McNeil
no occupation, Springfield Cottage, Borgue — and
the said William Dalziel McNeil — is a (5) person
of unsound mind, — and a proper person to be deta
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks in an
excited and very incoherent manner;
says he has been eternally fitted for
doing great works, and that he knows
all things.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson

Place of Abode, 27 Castle Street, Dum

DATED this Twenty second day of May — One thous
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, C. Granville Hey, being (1) a Bachelor in Medicine Master in Surgery, hereby certify, on soul and conscience, that I have this day, at (2) Borgue, in the County of Kirkcudbright, seen and personally examined William Dalziel McNeil, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

C. Granville Hey M.B. C.M.

DATED this twenty first day of May, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution, Dumfries, ~~Asylum~~ to receive therein William Dalziel McNeil, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother

Signature and Address Sarah McNeil X

Date 21st May, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Sarah McNeil, Springfield Cottage, Borgue, Kirkcudbright, Certificates under the hands of C. Granville Hey, and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) William Dalziel McNeil, Springfield Cottage, Borgue, Kirkcudbright and that the said William Dalziel McNeil, is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Dalziel McNeil, as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Dalziel McNeil, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(3) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty third day of May, One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

No. 8882.

William Dalziel McNeil

Adm: 21 May 1902.

—This Form shall in the keeping of the ...tendent of the Asylum ...e order of the Sheriff ...ved.

[FORM A.]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway, ——— *and his Substitutes,—at* Dumfries:

The Petition of Michael Mackenzie, Thistle Villa, Lockerbie,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Andrew Mackenzie, after designed, ———

your Petitioner's (1) Son, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Andrew Mackenzie, ——— to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(1) State degree of relation, or other capacity in which he stands to Lunatic.

(To be signed by the Party applying) Michael Mackenzie

DATED this 26th (2) day of May, — One thousand ~~eight~~ nine hundred and two years.

(2) The date of the Petition to be within fourteen clear days following the Date of the Medical Certificate.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

Christian Name and Surname of Patient at length,	Andrew Mackenzie.
Sex and Age,	Male - 25 years. -
Married, Single, or Widowed,	Single -
Condition of Life, and previous Occupation (if any).	Grocer.
Religious persuasion, so far as known,	Protestant.
Previous Place of Abode,	Thistle Villa, Lockerbie.
Place where Found and Examined,	do. do. do.
Length of Time Insane,	one day.
Whether First Attack,	First attack.
Age (if known) on First Attack,	
When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	
Duration of Existing Attack,	One day.
Supposed Cause,	
Whether subject to Epilepsy,	no.
Whether Suicidal,	no.
Whether dangerous to others,	yes.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Michael Mackenzie. Thistle Villa, Lockerbie Father. No.
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this 26th day of May, — One thousand ~~eight~~ nine hundred and two years.

(To be signed by party applying) Michael Mackenzie

MEDICAL CERTIFICATE No. I.

I, the undersigned James Mackachlan
being a (1) Bachelor of Medicine & Master in Surgery
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Hustle
Villa, Rockcliffe in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Andrew Mackenzie
Grocer's Assistant, Hustle Villa, Rockcliffe and that
the said Andrew Mackenzie is a (5)
person of unsound mind and a proper person to be
detained under Care and Treatment, and that I have formed this opinion
upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Excited &
flippant in manner. States that he assumes responsibilities
from unknown quarters to do for his things & it is all
from a desire to reform his parents & brothers that
he acts as he does.-

2. Other facts (if any) indicating Insanity communicated to me by
others: (7) Michael Mackenzie his father states that he
has been very peculiar since his return from South Africa
ten days ago and yesterday he has been very violent & wanting
to injure the home cart this morning was found on a road
with a knife in his hand & was about to kill his dog
he threatened to stab his brother with a stick.

Name and Medical Designation, James Mackachlan M.B.
Place of abode, Rockcliffe

DATED this 26th day of May One thousand
nine ~~eight~~ hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

MEDICAL CERTIFICATE No. II.

I, the undersigned J. H. Bell
being a (1) Bachelor of Medicine and Master in Surgery of Edin.
Universities
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3)
Hustle Villa, Rockcliffe, in the County of
Dumfries — separately from any other Medical Practitioner,
visited and personally examined (4) Andrew Mackenzie,
Grocer's Assistant, Hustle Villa, Rockcliffe and that
the said Andrew Mackenzie is a (5)
person of unsound mind and a proper person to be
detained under Care and Treatment, and that I have formed this opinion
upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He says that his head is too small & that it contains a
small brain, says that he passed the Standards at Sch.
dishonestly, says that his father will not allow him to do as
he likes & is excited & excited conduct.

2. Other facts (if any) indicating Insanity communicated to me by
others: (7) His father states that this morning he stole
off the house and was found in a wood partially undressed
with a large knife in his hand & was about to kill the
dog. He threatened to stab his brother with a stick.

Name and Medical Designation, J. H. Bell M.B. C.M.
Place of abode, Rockcliffe

DATED this 26th day of May One thousand
nine ~~eight~~ hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned James Macfachlan
being (1) a Bachelor of Medicine & Master of Surgery (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Thistle (2) State place of examination.
Villa, Lochmaben
in the County of Dumfries, seen and personally examined
Andrew Mackenzie, ——, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.†
And I further certify that the case of the said person is one of Emergency.
Said is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries
James Macfachlan

DATED, this 26th day of May — One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Andrew Mackenzie —
to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address, Michael Mackenzie Thistle Villa Lochmaben

Date 26th May, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute
of ~~the the County of~~ Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (1) Michael (1) Insert Name & Designation
Mackenzie, Thistle Villa, Lochmaben,
Certificates under the hands of James Macfachlan, ——
and J. S. Bell, ——, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had
separately visited and examined (2) Andrew MacKenzie Grocers (2) Describe him, and if a pauper, state so.
Assistant, Thistle Villa, Lochmaben, (Peter's son,) — and that the said
Andrew Mackenzie is a (3) person of unsound mind (3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Andrew MacKenzie — as a Patient into the Crichton Royal Institution for Lunatics at Dumfries, and I authorize he's Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Andrew MacKenzie, ——
—— which accompanied the said Petition.

DATED this Twenty-sixth day of May — One thousand ~~eight hundred and~~ nine hundred and two years.
Seven words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8883.

Name, Andrew Mackenzie.

Date of Admission, 26th May 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway *and his Substitute* at Dumfries:

The Petition of George William Davidson Moorville, near Carlisle, Cumberland:—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary alice Davidson ——

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Sister ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary alice Davidson — to the Crichton Royal Institution — and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Geo: W. Davidson

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 28th (4) day of May, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary alice Davidson.
2. Sex and Age,	Female.— age 19.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	House keeper.
5. Religious Persuasion, so far as known,	Primitive Methodist.
6. Previous Place of Abode,	Moorville Carlisle, not Dumfries.
7. Place where Found and Examined,	—
8. Length of time Insane,	—
9. Whether First Attack,	Age 19.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Suppression of Menstrual Flow.
13. Supposed Cause,	Not that I am aware of.
14. Whether subject to Epilepsy,	D° to D°
15. Whether Suicidal,	— —
16. Whether Dangerous to others,	— —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Geo: W. Davidson, Moorville, N° Carlisle — Brother — None of family have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approval. If previously under Medical or Surgical treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 28th day of May, — One thousand nine hundred and two years.

(*To be signed by the party applying*) Geo: W. Davidson

P. p.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Henry Ambrose Lediard being a (1) Doctor of Medicine, ——— and being in actual practice as a (2) Surgeon, ——— do hereby certify, on soul and conscience, that I have this day, at (3) 35 Lowther Carlisle ——— in the County of Cumberland ——— separately from any other Medical Practitioner, visited and personally examined (4) Mary Alice Davidson, Morrville, Carlisle, ——— and that the said Mary Alice Davidson is a (5) Lunatic, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Restless, inattentive, forgetful destructive, & unable to appreciate her position or relation to others.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
from Gertrude Potts. Constable Jardine. Can not fore to her hair. has a hysterical mind has rash. piles up crockery in centre of bedroom.

Name and Medical Designation, H. Lediard M.C.S.

Place of Abode, Carlisle

DATED this 26th day of May One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Alexander Thomson ——— being a (1) Doctor of Medicine of Glasgow University, and Surgeon. ——— and being in actual practice as a (2) Physician and Surgeon, ——— do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Mary Alice Davidson, Housekeeper, Morrville Carlisle ——— and that the said Mary Alice Davidson ——— is a (5) Person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has a depressed appearance; talks in a desponding manner about her condition; thinks something is going to happen to her, and that she must destroy things or she herself would be destroyed.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, 27 Carlton Street, Dumfries

DATED this Twenty-eighth day of May, ——— One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Geo. Sampson, — (1) Sheriff-Substitute of the Dumfries and Galloway, — having had produced to me, with a Petition at the instance of (2) Geo. Sampson, William Davidson, Moorville, Canal Carlisle, Certificates under the hands of Henry Rubrie Ledaird- and Alexander Thomson — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Mary Alice Davidson Moorville, Carlisle, (Pauper) and that the said Mary Alice Davidson is a (4) Lunatic, a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Alice Davidson as a patient into the (5) Public — Asylum of Crichton Royal Institution, and I authorize you to cause Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Alice Davidson, ——— which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, or if a Pauper, state the fact.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty eighth day of May, — One thousand nine hundred and two years.

To the Superintendent of the (5) Public Asylum of Crichton Royal Institution Dumfries.

Geo: Sampson
[Signature]

(5) Public, District, Parochial, or Private.

No. 8884

Mary Alice Davidson

Aden. 28 May 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~of the (2) Stewartry~~ of Dumfries & Galloway — *and his Substitutes,* I, at Dumfries:

The Petition of Samuel Hood, Farmer, Netherfield, Bowing:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Jane Hood, ——— your Petitioner's (3) daughter, ———

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Jane Hood, ——— to the Crichton Royal Institution Dumfries, and to sanction the admission into the said Asylum.

(*To be signed by the Party applying*) Samuel Hood

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty fourth (4) day of May, ——— One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Agnes Jane Hood.
2. Sex and Age,	Female - 31.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Domestic Servant.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Netherfield, Bowing.
7. Place where Found and Examined,	do do.
8. Length of time Insane,	Remark.
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	31.
(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under Medical Care or Treatment, state fact. 11. When and where previously under Examination and Treatment (5)	Never under treatment before.
12. Duration of Existing Attack,	Remark.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Private.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Father Mr. Samuel Hood, Farmer. Netherfield. Bowing. -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None. -

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty fourth day of May, ——— One thousand nine hundred and two years.

(*To be signed by the party applying*) Samuel Hood

T. & A. C.—April 1901.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Frederick Hugh Clarke, ——— being a (1) Graduate in Medicine of Glasgow Univer and being in actual practice as a (2) Physician & Surgeon, — do hereby certify, on soul and conscience, that I have this day, at (3) 1 Charlotte Dumfries, ——— in the County Dumfries, ——— separately from any other Medical Practitioner visited and personally examined (4) Agnes Jane Hood, Sp Netherfield, Bessweng, Kirkcudbright — and th the said Agnes Jane Hood, — is a (5) person of unsound mind, ——— and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is dull. That telephones are fixed in the windows of room and that voices speak to her thro them. Also that strangers come into the h and ask her against her friends.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her father, Samuel Hood. Netherfield Bessw informs me that she is violent, imagin people are in her room, that her friends being killed in the house and has often de

Name and Medical Designation, Fred: Hugh Clarke

Place of Abode, Charlotte Street Du

DATED this twenty ninth day of May, — One thous nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Thomas Jupson, ——— being a (1) Bachelor of Medicine of Edinburgh Univ and being in actual practice as a (2) physician and surge do hereby certify, on soul and conscience, that I have this day, at (3) 1 Charlo Street — Dumfries, ——— in the County Dumfries, — separately from any other Medical Practitione visited and personally examined (4) Agnes Jane Hood, Sp Netherfield, Bessweng, Kirkcudbright, and th the said Agnes Jane Hood — is a (5) person o unsound mind, — and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

She is dull & depressed — has vacant appearance & seems to have no interest in anything.

(7) *State the information and from whom derived.*

Her father Samuel Hood.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Not she has been violent & noisy at

Name and Medical Designation, Thomas Jupson M.B.

Place of Abode, 16 Castle St Dumfries

DATED this twenty ninth day of May, — One thous nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Frederick Hugh Clarke, being (1) Bachelor of Medicine & Master in Surgery hereby certify, on soul and conscience, that I have this day, at (2) Dumfries in the County of Dumfries, seen and personally examined Agnes Jane Hood, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Frederick Hugh Clarke M.B. C.M.

DATED this twenty ninth day of May One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on).

I hereby request the Superintendent of the Crichton Royal Institution Dumfries Asylum to receive therein Agnes Jane Hood, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address Samuel Hood Netherfield Beeswing.

Date 29th May, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of the (1) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Samuel Hood, Farmer, Netherfield, Beeswing, Certificates under the hands of Frederick Hugh Clarke, and Thomas Ferguson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Agnes Jane Hood, Netherfield Beeswing Stridden, and that the said Agnes Jane Hood, is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Jane Hood, as a patient into the (5) Public Asylum Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Jane Hood, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Thirtieth day of May, One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution, Dumfries.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8885.

Agnes Jane Hood.

Adm: 29 May 1903.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of Dumfries & Galloway and his Substitutes,—

The Petition of James Christison Inspector of Poor of Kirkinner humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Kevan your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Kevan to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

James Christison

(1) State degree of relationship or other quality in which Petitioner stands to Lunatic.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty eighth (4) day of May One thousand nine ~~eight~~ hundred and two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Janet Kevan
2. Sex and Age,	26 year Female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Fowton, Sorbie
7. Place where Found and Examined,	South Balfern, Kirkinner
8. Length of time Insane,	Cannot say
9. Whether First Attack,	no
10. Age (if known) on First Attack,	25 years
11. When and where previously under Examination and Treatment,	Entered asylum 6th July discharged 10th August 1901
12. Duration of Existing Attack,	Cannot say
13. Supposed Cause,	Do.
14. Whether subject to Epilepsy,	Do.
15. Whether Suicidal,	Do.
16. Whether Dangerous to others,	Do.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkinner
18. Date of becoming Chargeable,	26th May 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Samuel Kevan. South Balfour, Kirkinner. Father. Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty eighth day of May One thousand nine ~~eight~~ hundred and two

(*To be signed by Party applying*) James Christison

P. P.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Gilbert Ritchie Welsh
being a (1) Doctor of Medicine
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) South Bal
Kirkinner
Wigtown in the County
separately from any other Medical Practition
visited and personally examined (4) Janet Kevan, pauper
and t
the said Janet Kevan is a (5) person of
unsound mind and a proper Person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
She is acutely excited laughing and crying by
She rambles incoherently and imagines unknown
conspiring against her life. She is suicida

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her mother informs me she destroy all her clo
& wanders about the open in her night dress

Name and Medical Designation, Gilbert R. Welsh M.D.
Place of Abode, The Convent. Kirkinner
Dated this Twenty Seventh day of May One thousand nine
hundred and two

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street, and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) *State the facts.*
(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Charles MacBride
being a (1) Doctor of Medicine
and being in actual practice as a (2) Physician South-
hereby certify, on soul and conscience, that I have this day, at (3) Balgern, Kirkinner
Wigtown in the County of
separately from any other Medical Practitioner
visited and personally examined (4) Janet Kevan, a
Pauper and that
the said Janet Kevan is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Pupils are wa
dilated. General restlessness and ma
excited. Is incoherent. Talking ra
muttering the name of her Saviour

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Doctor says that she is muc
excited over religion and th
Regrets I hide from us all Religious D

Name and Medical Designation, Charles MacBride
Place of Abode Wigtown
Dated this twenty seventh day of May One thousand nine
hundred and and two Years

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) *State the facts.*
(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Cameron Esquire (1) Heredy Sheriff Substitute of the (2) Sheriffdom of Dumfries & Galloway having had produced to me, with a Petition at the instance of (3) James Christison Inspector of Poor Kirkinner Parish Certificates under the hands of Gilbert Aitken Welsh Doctor of Medicine Garlieston and Charles macBride M.D Wigtown, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Kevan a pauper at South Balfern Kirkcudbrightshire and that the said Janet Kevan is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Kevan as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Kevan which accompanied the said Petition.

DATED this twenty eighth day of May One thousand ~~eight~~ nine hundred and two years

John Cameron

To the Superintendent of the Southern Counties Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8886.

Janet Kevan.

(Kirkinner)

Adm: 29 May 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.

[FORM A] Enc.

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE ROYAL EDINBURGH ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Sheriffdom *of the Lothians & Peebles and his Substitutes,—*

(3) Insert Name and Designation.

The Petition of (3) William Wood, M Brander Doctor of Medicine 8 Bedford Place Edinburgh

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Amelia de Mayne Brown or M Brander your Petitioner's (4) wife

(4) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Amelia de Mayne Brown or M Brander to the ~~Royal Edinburgh~~ Royal Edinburgh Asylum for the Insane, and to sanction her admission into the said Asylum.

D & P

W B Rhynd

The Date of the Petition to be within fourteen clear days following the dates of the Medical Certificates.

Dated this 28th (5) day of May One thousand ~~eight~~ nine hundred and two years

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

Christian Name and Surname of Patient at length,	Amelia de Mayne Brown or M Brander
Sex and Age,	Female 53
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	
Religious Persuasion, so far as known,	Episcopalian
Previous Place of Abode,	8 Belgrave Place and R.E. Royal Infirmary
Place where Found and Examined,	Her own house R.E.
Length of time Insane,	Casual
Whether First Attack,	Casual under the influence of alcohol
Age (if known) on First Attack,	R. Yes.
When and where previously under Examination and Treatment,	Yes.
Duration of Existing Attack,	
Supposed Cause,	
Whether subject to Epilepsy,	
Whether Suicidal,	
Whether Dangerous to others,	
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mr D. Rhynd Husband unknown
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 28th day of May One thousand ~~eight~~ nine hundred and two years

(To be signed by the Party applying) W B Rhynd

ADDITIONAL STATEMENT.

For the Information of the Physician.

1. Birthplace, ... Manchester
2. Character of Education, ... very good
3. Is the natural disposition cheerful or melancholy —reserved or frank? . . . . . Cheerful & frank
4. Were the Patient's habits steady and industrious, or unsettled and intemperate? . . . . very unsettled & intemp
5. Has the Patient been insane before? If so, how often? How was he affected? How long? Where was he treated? . . . . . Yes, three, six w Maidstone & my house & Father Old age
6. What relatives of the Patient have been epileptic, paralytic, intemperate, eccentric, or insane? . . . . Mother Heart Disease
7. What was the cause of death (if dead) in the case of his father and mother, brothers or sisters? What diseases has he or his relatives been subject to? . . . . . Two temperate para
8. Did any disease or accident, pregnancy or nursing, change of circumstances, or affliction, predispose the Patient to this attack? . . . . . Yes Epilepsy Child
9. Was there any immediate cause of the attack that directly brought it on, *e. g.*, mental shock, childbirth, &c.? . . . . . an addn
10. What were the first symptoms of mental derangement observed, *e. g.*, alteration of conduct or disposition, elevation, depression, fancies, &c.? . . . . . Lost all respect for Decency or Dam
11. Were there any bodily symptoms present at first, *e. g.*, want of appetite, sleeplessness, falling off in flesh, pain in head, costiveness, derangement of female health, &c.? . . . . . untidy Left Home & take Child Husband & take Child
12. What changes have taken place in the Patient's mental symptoms since the attack commenced? . . . . Yes by striking
13. What changes have taken place in his bodily symptoms? . . . . . .
14. Is he dirty, destructive, untidy, or obscene?
15. Has he threatened or attempted violence to himself? If so, in what way? . . . . .
16. Has he threatened or attempted violence to others? If so, in what way? . . . . .

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Percy D Leslie Jr
being (1) M.D. & L.R.C.P. & L.R.C.S.
hereby certify, on soul and conscience, that I have this day, at (2) Royal Infirmary
in the County of Midlothian, seen and personally examined,
Amelia Dalmayne Brown or Alexander, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify, that the case of the said person is one of Emergency.

Percy D Leslie Jr

DATED this 28th day of May One thousand eight hundred and two.

(1) State Medical qualification. (2) State Place of examination.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

Edgeton Dumfries

I hereby request the Superintendent of the ~~Royal Edinburgh~~ Asylum for the Insane to receive therein Mrs Amelia Dalmayne Brown or Alexander to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband

Signature and Address, A D Alexander

Date, 28 May 1902

MEDICAL CERTIFICATE. No. I.

I, the undersigned, Henry Duncan Littlejohn
being a (1) M.D. Edinburgh and Fellow of the Royal College of Physicians Edinburgh
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day at (3) the Royal Infirmary Edinburgh in the County of Mid Lothian separately from any other Medical Practitioner,
visited and personally examined (4) Amelia Demaque Brown or Alexander and that
the said Amelia Demaque Brown or Alexander is a (5) lunatic and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds,
viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate, e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
(3) *Insert the Street and Number of the House (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

1. Facts indicating Insanity observed by myself: (6)
Blood appearance, Delusion, Wish is in the Malevolent & Wicked, steadily opposed against her Relatives &c

(6) *State the Facts.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Patient refused to give her consent for her safety & benefit & Relatives.

(7) *State the Information, and from whom derived.*

Name and Medical Designation, Henry D Littlejohn MD
Place of abode, 74 Royal Circus Edinburgh.

Dated this 28th day of May One thousand eight hundred and ten.

MEDICAL CERTIFICATE No. II.

I, the undersigned, William Leslie Lyall
being a (1) Bachelor of Medicine & Master in Surgery of the University of Edinburgh
and being in actual practice as a (2) Physician & Surgeon.
hereby certify, on soul and conscience, that I have this day, at (3) the Royal Infirmary Edinburgh in the County of Midlothian separately from any other Medical Practitioner,
visited and personally examined (4) Amelia Demaque Brown or Alexander and that
the said Amelia Demaque Brown or Alexander is a (5) person of unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds,
viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate, e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
(3) *Insert the Street, and Number of the House (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

1. Facts indicating Insanity observed by myself: (6)
Uproarious manner, repellant & abrupt talk. Constantly in a confused & rambling manner, wandering incoherently from one Subject to the other. At times imagines she is in Maternity Hospital, again in Rome & says her husband must be my assistant at the treatment here. Occasionally violent & noisy.

(6) *State the Facts.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Had been in the habit, she had not been so much annoyed since she had her last miscarriage. Conversation constantly foolish in the extreme. States by Nurse in charge.

(7) *State the Information, and from whom derived.*

Name and Medical Designation, W. Leslie Lyall MB CM.
Place of Abode, 8 Murrayfield Gardens Edinburgh

Dated this twenty eight day of May One thousand eight hundred and ten.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

(1) *State whether* Sheriff, Sheriff-Substitute, Steward, *or* Steward-Substitute.
(2) *State whether a* County *or* Stewartry.
(3) *Insert Name and Designation.*

I, Charles Cornelius Maconochie (1) Sheriff Substitute of the (2) Shire/Town of the Lothians and Peebles having had produced to me, with a Petition at the instance of (3) William Black, Advocate, Doctor of Medicine, 18 Blenheim Place, Edinburgh, Certificates under the hands of Henry Dunnan Littlejohn M.D. and William Leslie Lyall M.B.C.M., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Amelia M'Mayne Brown or Abercrombie Cullen, wife, and that the said Amelia M'Mayne Brown or Abercrombie is a (5) person of unsound mind,

(4) *Describe the Patient, and if a Pauper, state so.*

(5) Lunatic, *or* an insane person *or* an idiot, *or* a person of unsound mind.

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Amelia M'Mayne Brown or Abercrombie Cullen as a Patient into the ~~Royal Edinburgh Asylum~~ Crichton, Royal Institution, Dumfries for the Insane, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates and a Statement regarding the said Amelia M'Mayne Brown or Abercrombie, which accompanied the said Petition.

DATED this Thirtieth day of May One thousand ~~eight~~ hundred and two Fourteen years

C C Maconochie

To the Medical Superintendent of the ~~Royal Edinburgh~~ Crichton Asylum for the Insane, Dumfries.

No. 8884

Name, Amelia M'Mayne Brown or Abercrombie Cullen

Date of Admission, 30th May 1902.

LETTER OF OBLIGATION FOR PAYMENT OF BOARD.

_____ 18

GENTLEMEN,

As you have agreed to admit _____ into the Royal Edinburgh Asylum for the Insane, as an ordinary patient and boarder, at the rate of _____ per annum, I hereby oblige myself to pay to your Treasurer the said patient's board quarterly, and in advance, at the rate of _____ or such other rate as may from time to time be determined by you; to provide the requisite supplies of clothes for the patient, or, in the event of such clothes being supplied by you, to pay for the same to your Treasurer; to pay to your Treasurer for all stimulants or extraordinary furnishings supplied to the patient on the order of your Physicians; and to repay your Treasurer for all cash advanced to, or on behalf of, the patient. I also oblige myself to remove the patient when desired; to defray, in case of death, the funeral charges; and to fulfil any other condition incumbent on me as surety for the patient, according to your Regulations.

_____

To the Managers of the Royal Edinburgh Asylum for the Insane.

[FORM A]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries & Galloway, ——— and his Substitute at Dumfries.

The Petition of John Hyslop, Junr. Southpark, Lochrutton, Dumfries.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that John Hyslop, Farmer, Southpark, Lochrutton, your Petitioner's (1) Father, ——— is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Hyslop ~~Farmer~~, ——— to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(1) State Degree of Relationship, or other capacity in which Petitioner stands to Patient.

(To be signed by the Party applying) ..... John Hyslop. .....

DATED this thirty first — (2) day of May, ———

One thousand ~~eight~~ nine hundred and two.

(2) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Hyslop.
2. Sex and age,	M. 55.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Farmer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous place of abode,	Southpark.
7. Place where found and examined,	do
8. Length of time Insane,	since Thursday 29 May, 1902.
9. Whether First Attack,	First Attack.
10. Age (if known) on First Attack,	55.
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Never.
12. Duration of Existing Attack,	3 days.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	yes.
16. Whether Dangerous to others,	uncertain.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Ruwale.
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	His Mother, Elizabeth Lackie or Hyslop was insane,
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None. -

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this thirty first day of May, — One thousand ~~eight~~ nine hundred & two years.

(To be signed by the Party applying) ..... John Hyslop. .....

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, George Robert Livingston
being a (1) Bachelor of medicine & member of Surgery of
Edin University
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on Soul and Conscience, that I have this day, at (3) South Park Lochmaben in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) John Hyslop South Park Lochmaben and that the said John Hyslop is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
His insane appearance & manner

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr John Johnstone (mole catcher) Lochmaben tells me he formed the said John Hyslop wandering annlonely about threatening to do himself injury.

Name and Medical Designation, George R. Livingston M.B.

Place of Abode, 35 George Street Dumfries

DATED this thirty first day of May One thousand ~~eight~~ nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on Soul and Conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Hyslop, Farmer South Park, Lochmaben and that the said John Hyslop is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is in a depressed and melancholic condition; says he gets no sleep; that things have gone all wrong with him, and he cannot get over it —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D

Place of Abode, 27 Carlyle Street, Dumfries

DATED this thirty first day of May One thousand ~~eight~~ nine hundred and two years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, George Robert Livingston
being (1) Bachelor of Medicine & Master in Surgery
hereby certify, on Soul and Conscience, that I have this day, at (2) 7
Park Lochrutton in the County of Kirkcudbright, seen and personally examined John Hyslop Junr, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum.

(1) State medical qualification.
(2) State place of examination.

And I further certify that the case of the said Person is one of Emergency.

George R. Livingston M.B.

DATED this thirty first day of May One thousand ~~eight~~ hundred and Two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein John Hyslop
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Son

Signature and Address, John Hyslop Jr Southpark Lochrutton.

Date, 31st May 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of ~~the County of~~ Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (1) John Hyslop, Junr, Southpark, Lochrutton Certificates under the hands of George Robert Livingston and Alexander Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) ~~the alleged Lunatic~~ John Hyslop, Farmer, Southpark, Lochrutton and that the said John Hyslop is a (3) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Hyslop as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize the Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Hyslop. which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, if a Pauper, state
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Second day of June One thousand ~~eight hundred and~~ nine hundred and two years.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8888.

Name, John Hyslop.

Date of Admission, 31st May 1902.

ENCS

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~Sheriff~~ (2) Shire of Dumfries + Galloway *and his Substitutes,*— at Dumfries:

The Petition of Barbara Milne, 76 Thirlestane Road, Edinburgh:—

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that David Anderson Milne, ——

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son, ——, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said David Anderson Milne, —— to the Crichton Royal, Dumfries, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) B. Milne

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 4th (4) day of June — One thousand ~~eight hundred and~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	David Anderson Milne.
2. Sex and Age,	male. 29 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Gentleman. Qualifying as barrister.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	76 Thirlestane Road, Edinburgh
7. Place where Found and Examined,	Tighnabruaich, Kyles of Bute, & at Dumfries.
8. Length of time Insane,	Two weeks.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Two weeks.
13. Supposed Cause,	Typhoid Fever & debility consequent on it.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Not as far as can be said at present.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Barbara Milne (Mother) 76 Thirlestane Road Edinburgh. One aunt on his father's side had a temporary attack of about a year, and made a good recovery.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest Order or apprehension. If previously under Medical or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 2nd day of June, — One thousand ~~eight hundred and~~ nine hundred and two years.

(To be signed by the party applying) B. Milne

T. & A. C.—July 1897.

P p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Forbes & Wolfe
being a (1) Licentiate of the Royal College of Physicians of Edinburgh & Licentiate of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) Fernside, Tighnabruaich
in the County of Argyll
separately from any other Medical Practitioner, visited and personally examined (4) David Anderson Allen, 96 Thirlestane Road Edinburgh, and that the said David Anderson Allen, is a (5) Insane Person and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
On Sunday 25th May he cut his throat with a razor. Since then has been desirous of tearing off his bandages refused food & is under the impression that people are trying to set hold of him for imaginary misdemeanours which he thinks he has committed

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His attendant tells me that he is constantly trying to escape from the room when he thinks the attendant is not looking & that he tells him (the attendant) death is the only thing for him.

Name and Medical Designation, Forbes & Wolfe L.R.C.P. & L.R.C.S. Edin.
Place of Abode, Fernside Tighnabruaich

DATED this 2nd day of June, One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) David Anderson Allen Law Student, 96 Thirlestane Road, Edinburgh, and that the said David Anderson Allen is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is in a very depressed condition; has a wound in the throat which he says was done by himself with suicidal intent; and still maintains that he would be better out of existence

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.
Place of Abode 27 Castle Street, Dumfries

DATED this Fourth day of June, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Forbes H. Wolfe, being (1) L.R.C.P., L.R.C.S., Edin. &c., hereby certify, on soul and conscience, that I have this day, at (2) Dignabmaich in the County of Argyll, seen and personally examined David Anderson Milne, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Forbes H. Wolfe.

DATED this 2nd day of June, — One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Asylum to receive therein David Anderson Milne, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother

Signature and Address R. Milne 76 Thirlestane Rd Edin.

Date 2nd June 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate (1) Sheriff Substitute of the (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) Barbara Milne, 76 Thirlestane Road, Edinburgh, Certificates under the hands of Forbes H. Wolfe, and Alexander Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) David Anderson Milne, Torquhir, Dignabmaich, Argyllshire, (Patient) and that the said David Anderson Milne, is an (5) insane person, and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Anderson Milne as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Anderson Milne which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fourth day of June, One thousand ~~eight hundred and~~ nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8889.

David Anderson Brien

Adm: 3 June 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Counties of Dumfries & Galloway and his Substitutes, at Dumfries.

The Petition of David Anderson, 28 Cecilia's Road, Maybole, Ayrshire,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Anderson, sister,

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Anderson, to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) David Anderson

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twelfth (4) day of June One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Anderson.
2. Sex and Age,	Female. 23.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Domestic.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	28 Cecilia's Road, Maybole.
7. Place where Found and Examined,	do do.
8. Length of time Insane,	One day.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	22.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution, Dumfries.
12. Duration of Existing Attack,	One day.
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Grandfather. John Anderson. 28 Cecilia's Road. Maybole.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) Patient has previously in an Asylum, state name of latest Asylum. If previously under Medical or treatment.

I certify, that to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of June — One thousand nine hundred and two years.

(*To be signed by the party applying*) David Anderson

Ch 6883 Donald Anderson Minor

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Frederick Hugh Clarke, ——— being a (1) Graduate in Medicine of Glasgow Uni… and being in actual practice as a (2) Physician & Surgeon … do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Institution, Dumfries, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner visited and personally examined (4) Margaret Anderson, Spinster, 28, Castillis Road, Maybole, Ayrshire, and that the said Margaret Anderson, ——— is a (5) person of Unsound Mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is weak Childish, and very Emotional, Laughs with… Cause, and Answers Questions in a silly manner. –

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Frederick Hugh Clarke M.

Place of Abode, Charlotte Street Dumfries

DATED this twelfth day of June One thousand nine hundred and two years. –

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson M.B. being a (1) Doctor of Medicine of Glasgow University, and Licentiate of the Royal College of Physicians and Surgeons, and being in actual practice as a (2) Physician and Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution, Dumfries, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner visited and personally examined (4) Margaret Anderson, Unmarried 28 Castillis Road, Maybole, Ayrshire, and that the said Margaret Anderson, is a (5) person of Unsound mind, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is very weak minded, Laughs & talks in a silly manner; Cannot remember her own name or where she came from. –

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.B.

Place of Abode, 27 Castle St. Dumfries

DATED this twelfth day of June One thousand nine hundred and two years. –

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Robt B. Campbell. ——— (1) State medical qualification.
being (1) an M.B.Ch. of Edinburgh University ——— (2) State place of examination.
hereby certify, on soul and conscience, that I have this day, at (2) The Crichton Royal Institution
in the County of Dumfries ———, seen and personally examined
Margaret Anderson ———, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum
at (3) Dumfries. (3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Robt B. Campbell. M.B.Ch.

DATED this 10th — day of June — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution. Dumfries.
Asylum to receive therein Margaret Anderson ———
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, brother

Signature and Address David Anderson 28, Cassillis Road, Maybole.

Date 10th June, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire Advocate (1) Sheriff Substitute of ~~the~~ (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) David Anderson, 28 Cassillis Road, Maybole, Ayrshire, Certificates under the hands of Frederick Hugh Clarke, and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Anderson, 28 Cassillis Road, Maybole, Ayrshire, and that the said Margaret Anderson, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Anderson as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Anderson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Thirteenth day of June, — One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8890

Margaret Anderson.

Adm. 10 June 1902.

16,189.

[FORM B.]

25 and 26 Vict. Cap. 54, Sect. 16.

GENERAL BOARD OF LUNACY SCOTLAND 4 JUN 1892

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned George Bird

being desirous to transfer Augusta Ferguson

at present a Patient in Royal Edenbug Asylum, and (1)

from the said Asylum to the Crichton Royal Institution, Dumfries

beg to submit the subjoined Statement of Particulars regarding the said Patient and a Medical Certificate with respect to the mental and bodily condition of the said Patient:—

(1) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length	Augusta Ferguson
2. Sex and Age	Female, 60 years
3. Married, Single, or Widowed	Single
4. Condition of Life, and previous Occupation (if any)	Lady
5. Religious Persuasion, so far as known,	Prot.
6. Parish to which the Lunatic (if a Pauper) is Chargeable	—
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known) and whether any member of the Family known to be, or to have been insane	Brother. J. Grant Ferguson Baldmond Pilrochy

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the Authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(*To be signed by the Applicant*) George Bird B.A.

17 Duke Street Leith

(2) Curator Bonis to Miss Augusta Ferguson

(7) State degree of Relationship, or other capacity in which Applicant stands to Patient.

Dated this second day of June

One thousand ~~eight~~ nine hundred and two years

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Thomas Smith Clouston

(1) Name Asylum. hereby certify that I have this day at (1) Royal Edinburgh Asylum personally examined Augusta Ferguson who has been a

(2) Insert Date of Admission. Patient in said Asylum since (2) 2nd November 1899. and I

(3) Insert "is," or "is not," as the case may be. certify that the said Patient is a person of unsound mind, (3) is not epileptic, (3) is not suicidal, (3) is not dangerous to others. I also

(4) Describe Mental State. certify, with respect to the Mental State of the Patient, that (4) She is restless ~~unable to employ herself usefully~~. Labours under the delusion that she is the Empress Eugenie. "Ferguson. 99." that I shall receive nothing of

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5) ~~she is~~ in average.

and that there is nothing in the Mental or Bodily state of the Patient to make removal to the (1) Crichton Royal Asylum inadvisable; and I further certify that (6) there are no facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient :—

(6) Insert "the following are," or "there are no," as the case may be.

(Name) T. Clouston

(Medical Qualification) M.D. F.R.C.P.

(Date) 2nd June 1902

8891 Augusta Ferguson. Adm. 11 June 1902.

SANCTION BY THE BOARD OF LUNACY.

(*Under this Sanction a Patient may be Transferred without an Order of the Sheriff.*)

The foregoing Application having been made to the Board to authorize the Transfer

of Augusta Ferguson,

from Royal Edinburgh Asylum

to Crichton Royal Institution, Dumfries

and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

J. W. Pearce Secretary.

Dated at Edinburgh, this fourth day of June One thousand ~~eight~~ nine hundred and two.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

6th November, 1899.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (1) County~~ of Dumfries & Galloway, *and his Substitutes,*—

The Petition of Robert Elliot, Tower Yard, Portinscale, Keswick:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Clara Elliot, your Petitioner's (2) daughter, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Clara Elliot to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Robt Elliot

DATED this Twelfth (3) day of June, One thousand nine hundred and Two years.

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Clara Elliott
2. Sex and Age,	F. 32 yrs.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	In healthy life, was in Domestic service up till 18 mths ago.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Tower Yard, Portinscale, Keswick.
7. Place where Found and Examined,	Tower Yard, Portinscale, Keswick.
8. Length of time Insane,	12 mths.
9. Whether First Attack,	Yes-first attack.
10. Age (if known) on First Attack,	31 yrs.
11. When and where previously under Examination and Treatment (3),	
12. Duration of Existing Attack,	12 mths.
13. Supposed Cause,	not known.
14. Whether subject to Epilepsy,	not.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Cockermouth Union~~
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Elliott } parents. Mary Elliott } no previous insanity known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(3) Patient has previously in an Asylum, state date of latest admission. If only under Medical treatment, so state.

I certify, that to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of June, One thousand nine hundred and two years.

(*To be signed by the party applying*) Robert Elliot

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Thomas Mill, being a (1) Bachelor of Medicine & Surgery of Edinbu and being in actual practice as a (2) general practitioner, do hereby certify, on soul and conscience, that I have this day, at (3) Tower Yard, Portinscale, & Tower Yard, Portinscale, in the County Cumberland, separately from any other Medical Practitione visited and personally examined (4) Clara Elliot, Tower cotta Tower Yard, Portinscale, and th the said Clara Elliott, is a (5) person of unsound mind, and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the followi grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
When questioned the patient refuses to answer questions till she is pressed to do so & then only imperfectly & in as short a manner as possible She is most melancholic looking & very thin & unless moving or being questioned remains absolutely still with a fixed vacant look.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The patient for the last 12 mths has taken insufficient food, has refused to enter in any conversation whatever, has avoided meeting anybody & she has accidentally how so has not listened into any conversation with the persons she has known much thirteen yrs

Given by the Mother. Mary Elliot

Name and Medical Designation, Thomas Mill M.B. Ch

Place of Abode, Brundholme House Keswi

DATED this sixth day of June. One thousa nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson Doctor of Medicine of Glasgow University and Surgeon being a (1) Physician and Surgeon, and being in actual practice as a (2) The Crichton Royal Institution, do hereby certify, on soul and conscience, that I have this day, at (3) Dumfries, in the County separately from any other Medical Practitione visited and personally examined (4) Clara Elliot, domestic Ser Tower Yard Portinscale, Keswick and th the said Clara Elliot, is a (5) person of unsound mind, and a proper person to be detaine under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Sits with hands folded, and stares in a vacant manne Can with difficulty be got to answer questions; What she does say is incoherent.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D

Place of Abode, 27 Castle St., Dumfri

DATED this Twelfth day of June One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas Mill
being (1) Bachelor of Medicine & Surgery, Edin.
hereby certify, on soul and conscience, that I have this day, at (2) Tower Cottage
in the County of Cumberland, seen and personally examined
Clara Elliot, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) D. Crichton Royal Institution Dumfries.
And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Thomas Mill

DATED this sixth day of June One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution
Asylum to receive therein my daughter Clara Elliot
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address Robert Elliot
Tower Cottage.
Portincale.
Keswick.

Date 11th June 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (1) Sheriff Substitute
of ~~Dumfries and Galloway~~ at Dumfries,
having had produced to me, with a Petition at the instance of (2) Robert Elliot,
Tower Cottage, Portincale, Keswick,
Certificates under the hands of Thomas Mill,
and Alexander Thomson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Clara Elliot, Tower Cottage, Tower Road, Portincale, Keswick, (Parish of Crosthwaite) and that the said Clara Elliot, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Clara Elliot, as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Clara Elliot, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fifteenth day of June,
One thousand nine hundred and two years.

To the Superintendent of the (6) Public
Asylum of Crichton Royal Institution
Dumfries.

[*Signature*] Geo-Campion

(6) Public, District, Parochial, or Private.

No. 8892.

Clara Elliot.

Aden. 11 June 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Lanark *and his Substitutes,—*

The Petition of Alexander Neilson Lamb, Stockbroker, 15 Kelvinside Terrace, South, Glasgow, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Chancellor Lamb, your Petitioner's (3) Daughter, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Chancellor Lamb to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) A. N. Lamb

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twelfth (4) day of June One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elisabeth Chancellor Lamb.
2. Sex and Age,	Female 21 Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Teaching Music
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Glasgow
7. Place where Found and Examined,	Home
8. Length of time Insane,	about 7 weeks
9. Whether First Attack,	second attack
10. Age (if known) on First Attack,	16 Years
11. When and where previously under Examination and Treatment (5)	1896
12. Duration of Existing Attack,	about 7 weeks
13. Supposed Cause,	Away from Home
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Doubtful
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Neilson Lamb. 15. Kelvinside Terrace. Glasgow Father Sister of above, short period.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	No.

(5) State what has been done by him in an Asylum, state date of latest admission. If previously under Examination or Treatment, state when.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of June One thousand nine hundred and two

(To be signed by the party applying) A. N. Lamb

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thomson being a (1) Bachelor of Medicine & Master in Surgery of the University of Edinburgh and being in actual practice as a (2) General medical practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 15 Kelvinside Terrace South in the County of The City of Glasgow separately from any other Medical Practitioner visited and personally examined (4) Elisabeth Chancellor Lamb, of 15 Kelvinside Terrace South, Glasgow and the said Elisabeth Chancellor Lamb is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is apathetic, indifferent and depressed. States that she has no control over her thoughts, "mad ideas" are constantly running through her mind. The Worries terrifies, and is self-destructful in matters in which she is usually competent. Acknowledges having attempted suicide; but states that now absolutely indifferent whether she lives or dies. Cannot control her thoughts on any given subject for any length of time.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Lamb her sister informs me that this is her second attack — one having occurred about six years ago: that she attempted suicide during: That she has hinted at repeating the attempt: and that she is restless and frequently wanders without apparent cause. Although she does what she is told, she does nothing on her own initiative.

Name and Medical Designation, Alexander Thomson, M.B., Ch.

Place of Abode, 8 Hamilton Park Terrace, Hillhead, Gla

DATED this tenth day of June One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Francis Somerville being a (1) Doctor of Medicine of Glas. University and Fellow of Faculty of Glas. and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 15 Kelvinside Garden Terrace South in the City of Glasgow separately from any other Medical Practitioner visited and personally examined (4) Elisabeth Chancellor Lamb of 15 Kelvinside Ter. South, Glasgow and the said Elisabeth Chancellor Lamb is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) I have to treat her 7 years ago on account of delusions and peculiar behaviour. She had to be removed from a boarding school in England & be brought home as she was much worse. She is very apathetic & indifferent to whether she lives or dies and loses interest or is unable with her mind is confused and she has no control over her thoughts. She is much depressed. There is a history of frequent statements of suicide. This attack dates back in Germany, requiring immediate removal to an asylum. There have been at least one attempt at suicide and sister has also allusion to desire for self-destruction

2. Other facts (if any) indicating Insanity communicated to me by others: (7) can

Name and Medical Designation, W. F. Somerville M.

Place of Abode, 30 Wilson St Hillhead Gl

DATED this 11th day of June One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Alexander Lyle (1) Sheriff Substitute
of the (2) County of Lanark
having had produced to me, with a Petition at the instance of (3) Alexander Neilson Lamb Stockbroker 15 Kelvinside Terrace South Glasgow Alexander Thomson
Certificates under the hands of Alexander Thomson
and William Francis Somerville being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Lizzie Grey and Jessie Cowden Lamb Daughters
Elisabeth Chancellor Lamb 15 Kelvinside Terrace and that the said
Elisabeth Chancellor Lamb is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elisabeth Chancellor Lamb as a Patient into the Crichton Royal Asylum or Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elisabeth Chancellor Lamb which accompanied the said Petition.

DATED [at Glasgow] this Twelfth day of June
One thousand nine hundred and two

To the Superintendent of the (6) Crichton Royal
~~Patient of~~ Institution Dumfries

[*Signature*] T. M. Lyle

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, her, or them.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No 8893

Elizabeth Chancellor Lamb.

Aden: 13 June 1902.

EDINBURGH
6 JUN 1902
PARISH COUNCIL

16,196. [FORM B']

25 and 26 Vict. Cap. 54, Sect. 16.

GENERAL BOARD OF LUNACY
11 JUN

PPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I the undersigned (1) Joseph Henderson
ng desirous to transfer Francis Armstrong
present a Patient in Royal Edinburgh Asylum, and (2)
pauper patient of the parish of which
am Inspector of Poor, from the said Asylum to the
richton Institution, Dumfries.

(1) Insert Christian and Surname.

(2) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

; to submit the subjoined Statement of Particulars regarding the said patient, and a dical Certificate with respect to the mental and bodily condition of the said patient:—

STATEMENT OF PARTICULARS.

Christian Name and Surname of Patient at length,	Francis Armstrong.
Sex and Age,	Male: 58 years.
Married, Single, or Widowed,	married.
Condition of Life, and Previous Occupation (if any),	Joiner.
Religious Persuasion, so far as known,	Protestant
Parish to which the Lunatic (if a Pauper) is Chargeable,	Sundergarth
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	wife. Mrs Armstrong 15 Walkinshaw Street Johnston Paisley.

I certify that, to the best of my knowledge, the above particulars are correctly stated, d I hereby make Application for the authority of the General Board of Commissioners in nacy to the transfer of the patient as aforesaid.

(*Signature of Applicant*) Joseph Henderson,

(3) Inspector of Poor of the Parish of Sundergart

(3) State degree of Relationship, or other capacity in which Applicant stands to Patient. If a Lunatic is a Pauper, insert "Inspector of Poor of the Parish of

DATED this 9th day of June One thousand nine ndred & two years.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which llows, are required for the information of the Board and of the authorities of the Asylum which the Patient is to be transferred.

Elizabeth Russell Sands
No 2295

Francis

MEDICAL CERTIFICATE.

I, the undersigned Physician Superintendent of the Royal Edinburgh Asylum,
hereby certify that I have this day at (1) the Royal Edinburgh Asylum
personally examined Francis Armstrong who has been
Patient in said Asylum since (2) 21 March 1902. and I certify th
the said Patient is a person of unsound mind, (3) is not epileptic, (3) has not suicida
(3) is not dangerous to others. I also certify with respect to the Mental State
the Patient, that (4) there is a decided weakness of
impaired. He is orderly and does his work
fairly. On admission he had a dry tongue
in mood.
and with respect to the Bodily State of the Patient, that (4) it is fully be
that he is very well nourished, and has
He has frequently vomited since admission
tongue is dry. On chest is normal. He
and that there is nothing in the Mental or Bodily State of the Patient to make remov
to the (1) Crichton Royal Asylum inadvisable; an
I further certify that (5) the following facts known to me as to the pa
history of the Patient, bearing upon risk of suicide or danger to others, which I thi
ought to be brought under the notice of those who are to have charge of the Patient:—
Before coming to us he attempted suicid
by cutting his throat. Cuts on throat
have been sutured.

(1) Name Asylum.

(2) Insert Date of Admission.

(3) Insert "is," or "is not," as the case may be.

(4) Describe Mental State.

(4) Describe Bodily State.

(5) Insert "the following are," or "there are no," as the case may be.

(Signature) J. Clouston

(Medical Qualification) M.D. F.R.C.P.E.

(Date) 9th June 1902.

No. 8894.
Francis Armstrong
(Undergarth)
Admn: 14 June 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer
of Francis Armstrong
from Royal Edinburgh Asylum
to Crichton Royal Institution, Dumfries
and the Board having considered such Application and the accompanying Medica
Certificate, do hereby authorize the transfer, at any time within fourteen days from th
date hereof, of the said patient as requested.

W. L. Leuce
Secretary.

DATED at Edinburgh, this 11th day of June, On
thousand nine hundred and two.

Date of Sheriff's Order *[to be inserted at the Office of Board]*.

22nd March, 1902.

This Form shall be in the keeping of the Medical Superintendent of the Asylum for the time being, and shall be used by him in order of the Sheriff when required.

[FORM A.]

35 and 36 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway: —

and his Substitutes,— at Dumfries.

The Petition of Catharine Johnstone Kirkpatrick, 10 London Road Dumfries

humbly sheweth that it appears from the subjoined Statement, and accompanying Medical Certificates that Margaret Gibson Kirkpatrick residing at No 1 Gordon Street, Dumfries,

(1) the degree of relationship (or other capacity in which petitioner stands to Lunatic).

your Petitioner's (1) Sister, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Margaret Gibson Kirkpatrick, to the Crichton Royal Institution at Dumfries, and and to Sanction the admission into the said Institution.

(To be signed by the Party applying) Catherine J. Kirkpatrick

(2) The date of the Petition must be within fourteen clear days between the dates of the Medical Certificate.

DATED this Seventeenth (2) day of June, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

Christian Name and Surname of Patient at length,	Margaret Gibson Kirkpatrick.
Sex and Age,	Female - age 39 -
Married, Single, or Widowed,	Single -
Condition of Life, and previous Occupation (if any),	No occupation -
Religious persuasion, so far as known,	Protestant -
Previous Place of Abode,	Laurel Cottage Lochburn.
Place where Found and Examined,	Gordon Street - Dumfries.
Length of Time Insane,	a Few days.
Whether First Attack,	Yes.
Age (if known) on First Attack,	39.
When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception or approximation thereto,	—
Duration of Existing Attack,	a Few days.
Supposed Cause,	—
Whether subject to Epilepsy,	No.
Whether Suicidal,	No.
Whether dangerous to others,	No.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not chargeable.
Date of becoming Chargeable,	—
Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Catharine Johnstone Kirkpatrick, No 1 Gordon St Dumfries - Sister.
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this 17th day of June, — One thousand nine hundred and two years.

(To be signed by party applying) Catherine J. Kirkpatrick

MEDICAL CERTIFICATE No. I.

I, the undersigned Thomas Ingram, ——
being a (1) Bachelor of Medicine of Edinburgh University, —
and being in actual practice as a (2) General Medical practitioner
do hereby certify, on soul and conscience, that I have this day, at (3)
1 Gordon St. Dumfries, —— in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Margaret Gibson Kirkpat
Spinster, of 1 Gordon St. Dumfries, —— and that
the said Margaret Gibson Kirkpatrick — is a (5)
person of unsound mind, and a proper person to be
detained under Care and Treatment, and that I have formed this opinion
upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
She is in a state of violent behaviour — she
going out to the street in her night shirt, with hair part
shouting singing laughing & talking in an incoherent
& knocking about the furniture.

2. Other facts (if any) indicating Insanity communicated to me by
others: (7) That she is frequently noisy violent
& beyond control & behaves in an insane

By her brother
Catherine J. Kirkpatrick

Name and Medical Designation, Thomas Ingram M.B.C.M.
Place of abode, 16 Castle St Dumfries

DATED this seventeenth day of June, — One thousand
eight hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house, (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

MEDICAL CERTIFICATE No. II.

I, the undersigned Peter Murray Kerr, ——
being a (1) Bachelor of Medicine and Master in
Surgery the University of Edinburgh, ——
and being in actual practice as a (2) General Practitioner,
hereby certify, on soul and conscience, that I have this day, at (3) 1
Gordon Street, Dumfries —— in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Margaret Gibson Kirkpatrick
Spinster, 1 Gordon Street Dumfries, and that
the said Margaret Gibson Kirkpatrick —— is a (5)
person of unsound mind, and a proper person to be
detained under Care and Treatment, and that I have formed this opinion
upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her insane appearance and manner
she is mildly excited, she is incoherent in
speech: marked loss of control: talks incess

2. Other facts (if any) indicating Insanity communicated to me by
others: (7)

Name and Medical Designation, Peter Murray Kerr
Place of abode, 16 Castle Street Dumfries

DATED this seventeenth day of June, — One thousand
eight hundred and two years. —

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas Ferguson being (1) Resident Medical Officer of Sudenna of Edinburgh Asylum hereby certify, on soul and conscience, that I have this day, at (2) 1 Gordon St Dumfries in the County of Dumfries, seen and personally examined Margaret Gibson Kirkpatrick Spinster, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Thomas Ferguson M.B.

DATED this Seventeenth day of June One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Margaret Gibson Kirkpatrick to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister

Signature and Address, Sister Catherine J. Kirkpatrick

Date, 17th June 1902. 1 Gordon St. Dumfries

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff Substitute of ~~the the County of~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Catharine Johnstone Kirkpatrick, No 1 Gordon Street, Dumfries.— Certificates under the hands of Thomas Ferguson, M.B. and Peter Murray Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Margaret Gibson Kirkpatrick, No 1 Gordon Street, Dumfries, (Petitioners Sister)— and that the said Margaret Gibson Kirkpatrick is a (3) person of unsound mind, and in proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Margaret Gibson Kirkpatrick as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Gibson Kirkpatrick which accompanied the said Petition.

(1) Insert Name & Designation.

(2) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Eighteenth day of June, — One thousand ~~eight~~ nine hundred and two years. Printed words deleted.

Geo: Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

going out to the street in her nightdress, were noisy, shouting, singing, laughing & talking in an incoherent & knocking about the furniture.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That she is frequently noisy violent & beyond control & behaves in an insane manner

By her brother Catherine J. Kilpatrick

Name and Medical Designation, Thomas Ferguson M.B. & Ch.
Place of abode, 16 Castle St Dumfries

DATED this seventeenth day of June, — One thousand eight hundred and two years.

MEDICAL CERTIFICATE No. II.

I, the undersigned Peter Murray Kerr, ——— being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and being in actual practice as a (2) General Practitioner, hereby certify, on soul and conscience, that I have this day, at (3) 1 Gordon Street, Dumfries, —— in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Margaret Wilson Kilpatrick, spinster, 1 Gordon Street Dumfries, and that the said Margaret Wilson Kilpatrick ——— is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

1. Facts indicating Insanity observed by myself: (6)

(6) *State the facts*

Her manner of appearance and demeanour she is mildly excited, she is incoherent in speech; marked loss of control; & the insane

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M.B.
Place of abode, 20 Castle Street Dumfries

DATED this seventeenth day of June, — One thousand eight hundred and two years. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned Thomas Ferguson being (1) a Bachelor of Medicine of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) 1 Gordon St. Dumfries in the County of Dumfries, seen and personally examined Margaret Gibson Kirkpatrick Spinster, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum. And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

Thomas Ferguson M.B.C.M.

DATED, this ~~seventeenth~~ 18th day of June, One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Margaret Gibson Kirkpatrick to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister

Signature and Address, Sister Catherine J. Kirkpatrick

Date, 17th June 1902. 1 Gordon St. Dumfries

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff Substitute of ~~the the County of~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Catharine Johnstone Kirkpatrick, No. 1 Gordon Street, Dumfries. — Certificates under the hands of Thomas Ferguson, M.B. and Peter Murray Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Margaret Gibson Kirkpatrick, No. 1 Gordon Street, Dumfries, (Petitioners Sister) — and that the said Margaret Gibson Kirkpatrick is a (3) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Margaret Gibson Kirkpatrick as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Gibson Kirkpatrick which accompanied the said Petition.

(1) Insert Name & Designation

(2) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Eighteenth day of June, — One thousand ~~eight~~ nine hundred and ~~two~~ years. ~~Date printed words deleted.~~

Geo: Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8895.

Name, Margaret Gibson Kirkpatrick

Date of Admission, 14 June 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff. ~~of the (2) County~~ of Dumfries & Galloway and his Substitutes, at Dumfries:

The Petition of Joseph Gordon, farmer, Burholm Dairy, Kirkcowan.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Gordon, your Petitioner's (3) Daughter, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Gordon to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Joseph Gordon

DATED this Twentieth (4) day of June, One thousand ~~eight~~ hundred and two years.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Agnes Gordon.
2. Sex and Age,	Female. 22 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Domestic - at home.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Burholm Dairy, Kirkcowan.
7. Place where Found and Examined,	Burholm Dairy, Kirkcowan.
8. Length of time Insane,	Six months.
9. Whether First Attack,	Third -
10. Age (if known) on First Attack,	seventeen.
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	Southern Counties Asylum. 3 years SIX months. 2½ years ago. Six months.
12. Duration of Existing Attack,	—
13. Supposed Cause,	no
14. Whether subject to Epilepsy,	not during this attack.
15. Whether Suicidal,	Slightly violent at times.
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Joseph Gordon - Father - Farmer Burholm Dairy, Kirkcowan.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Nineteenth day of June, One thousand ~~eight~~ nine hundred and two years.

(To be signed by the Party applying) Joseph Gordon

P. T.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Norman James McKie, ——
being a (1) Doctor of Medicine of the University of Edin
and being in actual practice as a (2) Doctor of Medicine ——
do hereby certify, on soul and conscience, that I have this day, at (3) Barbolus Dairy, Pleasance, —— in the County of Kirkcudbright —— separately from any other Medical Practitioner, visited and personally examined (4) Agnes Gordon, Barbolus Dairy, Pleasance, —— and that the said Agnes Gordon, —— is a (5) person of unsound mind —— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She was lying on the of her bedroom chewing a piece of stick. She gave answers to any questions I put to her. She featu was unconscious, but twice she gave a moan

(7) *State the information, and from whom derived.*

Her mother Mrs Jessie Gordon.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Refuses to do anything, will take food or swa she gets out will not come in again, belts m any attempt is made to get her to do what is

Name and Medical Designation, Norman James McKie

Place of Abode, 111 Arthur Street, Newton Stew

DATED this nineteenth day of June, —— One thousand eight hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, David Smith ——
being a (1) Bachelor of Medicine and Master of Surgery of the University of Glasgow —— and being in actual practice as a (2) General Practitioner —— do hereby certify, on soul and conscience, that I have this day, at (3) Barbolus Dairy, Pleasance —— in the County of Kirkcudbright —— separately from any other Medical Practitioner, visited and personally examined (4) Agnes Gordon, Barbolus Dairy Pleasance, —— and that the said Agnes Gordon, —— is a (5) person of unsound mind —— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) On entering into con with her she made no answer to my questions for some time when I asked her why she would not obey the rules the S. She would not do so as she wished to poison her. 'Poison' was being introduced into her food and medicine.

(7) *State the information, and from whom derived.*

Facts communicated verbally by Mrs Jessie Gordon.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) "When Obedience is visited on the Enemies nobody accuses me of wishing to torture her and further the times campaign such as it was such the habit to do when well. She has used violence to me."

Name and Medical Designation, David Smith

Place of Abode St John Street, Pleasance

DATED this nineteenth day of June, —— One thousand eight hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, David Smith
being (1) Bachelor of Medicine & Master of Surgery of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) Barholm Dairy, Creetown
in the County of Kirkcudbright, seen and personally examined
Agnes Gordon, Barholm Dairy, Creetown, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a
sufficiently good state of bodily health at this date to be removed to the Asylum
at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

David Smith

Dated this Nineteenth day of June One thousand nine hundred and two years.

I hereby request the Commissioners of the Lunacy Board Authority to receive therein Agnes Gordon
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother in Law

Signature and Address, James Ferries, Barholm, Creetown

Date, 19 June, 1902.

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having had produced to me, with a Petition at the instance of (4) Joseph Gordon, Farmer, Barholm Dairy, Creetown, Certificates under the hands of Thomas James McKie, — and David Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Agnes Gordon, Barholm Dairy, Creetown, Kirkcudbright, and that the said Agnes Gordon, is a (6) Lunatic & Insane Person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Gordon as a Patient into the (7) Public Asylum of Southern Counties, and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Gordon, which accompanied the said Petition.

Dated this Twenty first day of June — One thousand eight nine hundred and two years. — Three words deleted.

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries,

Geo. Campion

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

(2) State the information, and from whom derived.

Her mother and Mrs Jessie Gordon.

2. Other facts (if any) indicating Insanity communicated to me by others: (2) Refuses to do anything, won't take food or exercise she goes out will not come in again, belts [illegible] any attempt is made to get her to do what is

Name and Medical Designation, Norman James McVie

Place of Abode, 14 Arthur Street, Newton Stewart

DATED this nineteenth day of June, One thousand eight hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e. g. Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Proper state so.

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) State the facts.

I, the undersigned, David Smith, being a (1) Bachelor of Medicine and Master of Surgery of the University of Glasgow and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Barholm Dairy, Creetown, in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Agnes Gordon, Barholm Dairy, Creetown, and that the said Agnes Gordon, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) On entering into Conversation with her she made no answer to my questions for some time when I asked her why she would not obey her husband she replied that she would not do so as she wished to poison him. Prison, Was being introduced into her food and medicine.

(7) State the information, and from whom derived.

Facts communicated to me by her husband Elizabeth Gordon.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) "When obedience is insisted on she becomes violent and accuses me of wishing to torture her and further she uses language such as it was not her habit to do when well. She has used violence to me"

Name and Medical Designation, David Smith

Place of Abode St John Street, Creetown

DATED this nineteenth day of June, One thousand eight hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, David Smith
being (1) Bachelor of Medicine and Master of Surgery of Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Barholm Dairy, Creetown in the County of Kirkcudbright, seen and personally examined Agnes Gordon, Barholm Dairy, Creetown, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

David Smith

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Agnes Gordon to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother in Law

Signature and Address, James Ferries, Barholm, Creetown.

Date, 19 June, 1902.

having had produced to me, with a Petition at the instance of (3) Joseph Gordon, Farmer, Barholm Dairy, Creetown, Certificates under the hands of Norman James Miller, — and David Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Gordon, Barholm Dairy, Creetown, Kirkcudbright, and that the said Agnes Gordon, is a (5) Lunatic or Insane Person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Gordon as a Patient into the (6) Public Asylum of Southern Counties, and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Gordon, which accompanied the said Petition.

DATED this Twenty first day of June — One thousand ~~eight~~ nine hundred and two Years. — Three words deleted.

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries,

Geo. Lamplon

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

hundred ~~and~~ and two years.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, David Smith
being a (1) Bachelor of Medicine and Master of Surgery of the University of Glasgow Rural Practitioner
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3) Barholm Dairy Cottages in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Agnes Gordon, Barholm Dairy Cottages, and that the said Agnes Gordon is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) On entering into speech with her she made no answer to my questions for some time when I asked her why she would not she replied that she would not do so as she wished to poison me. 'Poison' was being introduced into her food and medicine.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
"When Obedience is visited on she becomes violent and accuses me of wishing to torture her and further that I use language such as it was not her habit to do when well. She has used violence to me"

Facts communicated to me by her mother Elizabeth Gordon.

Name and Medical Designation, David Smith

Place of Abode St John Street, Stranraer

DATED this nineteenth day of June, One thousand ~~eight~~ nine hundred ~~and~~ and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, David Smith
being (1) Bachelor of Medicine and Master of Surgery of Glasgow University Barholm Dairy, Creetown
hereby certify, on soul and conscience, that I have this day, at (2) ——
in the County of Kirkcudbright, seen and personally examined
Agnes Gordon, Barholm Dairy, Creetown, ——, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

David Smith

DATED this nineteenth day of June, — One thousand ~~eight~~ nine hundred and two years. —

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson, —(1) Sheriff Substitute of the Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Joseph Gordon, Farmer, Barholm Dairy, Creetown, Certificates under the hands of Thomas James Mitchell, — and David Smith ——, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Agnes Gordon, Barholm Dairy, Creetown, ~~Kirkcudbright~~ and that she said Agnes Gordon, is a (3) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Gordon — as a Patient into the (4) Public — Asylum of Southern Counties, and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Gordon, which accompanied the said Petition.

DATED this Twenty first day of June — One thousand ~~eight~~ nine hundred and two years. — Three words deleted.

To the Superintendent of the (5) Public Asylum of Southern Counties Dumfries,

Geo. Lampson

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No 8896

Agnes Gordon

Adm 20 June 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the~~ (2) Dumfries of Galloway, and his Substitutes,—at Dumfries;

The Petition of Joshua Hughes-James, D.C.L., Rector in the Holy Trinity Vicarage, Hull,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Anna Maria James,

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Sister, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Anna Maria James, to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Joshua Hughes-James D.C.L

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty third (4) day of June, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Anna Maria James.
2. Sex and Age,	Female. - age 69 last birthday.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Formerly a teacher; for some years no occupation.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	St Andrew's Hospital, Northampton; before that Wandsworth.
7. Place where Found and Examined,	~~Dighton~~ Dumfries.
8. Length of time Insane,	Four years
9. Whether First Attack,	Had a somewhat similar attack, lasting for some months in 1859.
10. Age (if known) on First Attack,	Age 27.
11. When and where previously under Examination and Treatment (5)	St Andrews Hospital, Northampton, since August 1898.
12. Duration of Existing Attack,	about four years.
13. Supposed Cause,	Senile Decay.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Joshua Hughes-James, Holy Trinity Vicarage, Hull. - brother - No member of the family before known to have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) Patient has previously in an Asylum, state date of latest order or appeal-ed to. If previously under other treatment.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty-third day of June, One thousand nine hundred and two.

(To be signed by the party applying) Joshua Hughes-James

P. p.

R. A. C.—April 1901.

No 2996 Annie Gold 1902

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon and
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 27 Castle Street, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner visited and personally examined (4) Anna Maria Jones, Spinster, St Andrews Hospital, Northampton, and that the said Anna Maria Jones is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her depressed appearance, and mental Enfeeblement; Can be got with difficulty to answer questions and then only in a confused and incoherent manner. Cannot be got to enter into Conversation.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 27 Castle Street, Dumfries

DATED this twenty first day of June One thousand nine hundred and two years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, James C. Gilchrist
being a (1) Bachelor of Medicine of the University of Edinburgh
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Castle Local Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner visited and personally examined (4) Anna Maria Jones spinster from St Andrews Hospital, Northampton and that the said Anna Maria Jones is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) she is evidently demented slow in speech, can only answer questions, and is incoherent in her answers.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, James C Gilchrist M.B.Ch.

Place of Abode, Linwood Dumfries.

DATED this 23rd day of June One thousand nine hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson
being (1) Doctor of medicine 27 Castle St
hereby certify, on soul and conscience, that I have this day, at (2) 27 Castle St
in the County of Dumfries, seen and personally examined
Anna Maria Jones, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Alex. Thomson

DATED this twenty-first day of June One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution, Dumfries
Asylum to receive therein Miss Anna Maria Jones,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Josh. Hughes-Jones Holy Trinity Vicarage, Hull.

Date 21st June 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of ~~the~~ (1) Dumfries & Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) Joshua Hughes Jones, B.A. Clerk in Holy Orders, Holy Trinity Vicarage, Hull
Certificates under the hands of Alexander Thomson,
and James Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Anna Maria Jones, St Andrew's Hospital, Northampton (Private Patient) and that the said Anna Maria Jones, is a (4) person of unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Anna Maria Jones, as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Anna Maria Jones, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty fourth day of June
One thousand nine hundred and ~~two~~ years.

To the Superintendent of the (5) Public
Asylum of Crichton Royal Institution, at Dumfries.

(5) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8894.

Anna Maria Jones.

Adm: 21 June 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries, Galloway, ~~of Dumfriesshire~~ *and his Substitutes,*— at Dumfries:

The Petition of William Louther Nicholson Kent Lodge, Annan,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Nicholson, Kent Lodge, Annan,

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Nicholson, _____ to the Crichton Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Wm Le Nicholson

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 28th (4) day of June,— One thousand nine hundred and Two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Nicholson.
2. Sex and Age,	Male - 34 Years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Solicitor.
5. Religious Persuasion, so far as known,	Episcopal Church.
6. Previous Place of Abode,	Kent Lodge - Annan.
7. Place where Found and Examined,	Do
8. Length of time Insane,	Do / Variable for 5 Years.
9. Whether First Attack,	29 Years.
10. Age (if known) on First Attack,	1899 Edinburgh (St Byrom Bramwell's Woodburn Home)
11. When and where previously under Examination and Treatment (5)	a few hours.
12. Duration of Existing Attack,	Unknown.
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Private Patient
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	William Louther Nicholson Kent Lodge - Annan. Father. / No.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission, approximate if not exact. If previously under Examination or Treatment, state where.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 27th day of June,— One thousand nine hundred and two years.

(To be signed by the party applying) Wm Le Nicholson

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Pitken Thomson —
being a (1) Graduate of University of Glasgow
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Bank
House, Dumfries, in the County
separately from any other Medical Practitioner
visited and personally examined (4) John Nicholson
the said John Nicholson, — is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Utterly incoherent
at this moment. Foam at mouth
Wrapped in sheet. Sometimes
not speak. has a strange wild

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His friends. has suddenly taken
his mother by striking her on the
breast & strangling her. Violently

Name and Medical Designation, John Pitken Thomson
Place of Abode, Bank House Dumfries

DATED this 27th day of June — One thousand
nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson —
being a (1) Doctor of Medicine & Surgeon
University and Surgeon
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) The
Crichton Royal Institution,
Dumfries, — in the County
separately from any other Medical Practitioner
visited and personally examined (4) John Nicholson
Solicitor, Keyl Lodge, Annan — and the
the said John Nicholson, — is a (5) person
of unsound mind, — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Insane appearance
talks in a confused and incoherent manner
about musical tones and other sound brain
all changed, and about the treatment
by mesmerism he has been under, and other fancies
that has put his head all wrong—

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.
Place of Abode, 27 Castle St., Dumfries

DATED this 28th day of June — One thousand
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Picken Muir, being (1) Graduate of University of Glasgow, hereby certify, on soul and conscience, that I have this day, at (2) Hunt Lodge in the County of Dumfries, seen and personally examined John Nicholson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries;

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

John Picken Muir M.B. & C.M.

DATED this 27th day of June, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Dumfries, Asylum to receive therein John Nicholson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Father

Signature and Address Wm Nicholson Hunt Lodge Annan

Date 27th June 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson (1) Sheriff-Substitute of the ~~(2)~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) William Nicholson, Hunt Lodge, Annan, Certificates under the hands of John Picken Muir and Alex. Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) John Nicholson, Solicitor, Hunt Lodge, Annan, (Petr's Son) and that the said John Nicholson, is a (4) Lunatic, a person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Nicholson, as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Nicholson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(2) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Thirtieth day of June One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution Dumfries.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo. Lampson

No. 8898.

John Nicholson

Adm. 28 June 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff —— *of the* (2) County of Dumfries & Galloway, *and his Substitutes,*—at Dumfries:

The Petition of John Tannock, residing at Knockenaile Lemmock, County of Kirk——

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Murdoch Alexander Tannock, your Petitioner's (3) wife, residing Knockenaile Lemmock, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Murdoch Alexander Tannock,— to the Crichton Royal Institution Dumfries, and to sanction her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John Tannock

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 28th — (4) day of June, —— One thousand nine hundred and two years.—

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Murdoch Alexander Tannock.
2. Sex and Age,	Female. Forty years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Married Household duties.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Knockenaile, Lemmock.
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Two weeks.
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	answered in 2.
11. When and where previously under Examination and Treatment (5)	Never.
12. Duration of Existing Attack,	Two weeks.
13. Supposed Cause,	Child birth.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Tannock Farmer Knockenaile, Lemmock.—Husband.—
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	——

(5) If patient has previously in an asylum, state date of latest admission, approximate if not exact. If never previously under treatment or treatment unknown, so state.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 28th — day of June, —— One thousand nine hundred and two years.— *(To be signed by the party applying)* John Tannock

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Gilmour Kerr, ——
being a (1) M.B., Cm. of Glasgow University, ——
and being in actual practice as a (2) Physician and Surgeon, ——
do hereby certify, on soul and conscience, that I have this day, at (3) Knockna
Cumnock, ——— in the County of
Ayr, ——— separately from any other Medical Practitioner,
visited and personally examined (4) Mary Mundell Alexander Ta
Knockmaib, Cumnock, ——— and that
the said Mary Mundell Alexander Taunock (5) person of
unsound mind, ——— and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Inability to hol
rational conversation; her manner & conduct are
at variance with her usual habits; in very app
of some terrible calamity going to overtake her.
about the house wringing her hands & strug
abject misery.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) H
informs me she is quite well & refuses to go to bed
night. She has delusions one of which is that An
is coming for her to take her to Hades. Was
this morning burning in the fire some of her clothes
had thrown on the hearth stone that she was going a
had thrown fathom where come Cannon.

Name and Medical Designation, John Gilmour Kerr. M

Place of Abode, Stepends, Cumnock.

DATED this 28th day of June — One thousand
nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, James C. Crichton, ——
being a (1) Bachelor of Medicine of the University of Edinburgh
and being in actual practice as a (2) Physician, ——
do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton
Royal Institution, Dumfries, ——— in the County of
Dumfries, ——— separately from any other Medical Practitioner,
visited and personally examined (4) Mary Mundell Alexander Taunock
Knockmaib, Cumnock, ——— and that
the said Mary Mundell Alexander Taunock, is a (5) person of
unsound mind ——— and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
is unhappy in no reason, says she is nervous and
frightened. Is awake at night and puts away
frightened. She looks frightened also. Believes that
the doctor are making a fool of her by keeping her in
bed during puerperium. Is evidently Melancholic

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, James C Crichton M.B. C.M.

Place of Abode, Lurgood Dumfries

DATED this 28th day of June, — One thousand
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Gilmour Kerr
being (1) M.B., C.M. of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) Knockbrair Cumnock,
in the County of Ayr, seen and personally examined
Mary Murdoch Alexander Cumnock, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a
sufficiently good state of bodily health at this date to be removed to the Asylum
at (3) Crichton Royal Institution, Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

John Gilmour Kerr M.B., C.M.

Dated this 28th day of June, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein Mary Murdoch Alexander Cumnock,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband

Signature and Address John Cumnock

Date 28th June 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I George Campion (1) Sheriff-Substitute
of Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) John Cumnock
Knockbrair, Cumnock, Ayrshire,
Certificates under the hands of John Gilmour Kerr,
and James L. Gilchrist, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Murdoch Alexander Cumnock Knockbrair Cumnock (Pet's Wife) and that the said Mary Murdoch Alexander Cumnock is a (5) Person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Murdoch Alexander Cumnock as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Murdoch Alexander Cumnock which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated [at Dumfries,] this Thirtieth day of June
One thousand nine hundred and two years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution
Dumfries.

[Signature] Geo. Campion

(7) Public, District, Parochial, or Private.

No. 8899.

Mary Murdock Alias: Tannock

Adm. 28 June 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honorable the (1) Sheriff — *of the* (2) ~~Dumfries~~ and Galloway, — *and his Substitutes, at Dumfries.*

The Petition of Charles Smith Mason, Douglas Bank, Lochaleiggs, Dumfries,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert James Smith, Douglas Bank, Lochaleiggs,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Brother, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert James Smith, to the Crichton Royal Institution, Dumfries, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) C. J. Smith

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirtieth (4) day of June, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Robert James Smith.
2. Sex and Age,	Male. 25.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Mason.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Douglas Bank, Lochaleiggs.
7. Place where Found and Examined,	County Buildings, Dumfries.
8. Length of time Insane,	A few days.
9. Whether First Attack,	A slight attack a few months ago.
10. Age (if known) on First Attack,	25.
11. When and where previously under Examination and Treatment (5)	Never under treatment, except by family physician.
12. Duration of Existing Attack,	A few days.
13. Supposed Cause,	Not known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Dumfries~~
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Mary Garnettes or Smith, Widow, Douglas Bank, Lochaleiggs - Mother - of the Petitioner. None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under Examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirtieth day of June, — One thousand nine hundred and two years.

(To be signed by the party applying) C. J. Smith

T. & A. C.—Nov. 1890.

P p

Charles Smith Mason Farmer

No. 8809

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Geo. Robert Livingston
being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) County Building, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Robert James Smith Mason Lochartbrigg, Dumfries, and that the said Robert James Smith is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane appearance & manner. Delusions. He believes people are all talking about him. Hears voices saying evil things about

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Geo. R. Livingston M.B.C.M.

Place of Abode, 35 Geo. St. Dumfries

DATED this thirteenth day of June, One thousand nine hundred & two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Peter Murray Kerr
being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh,
and being in actual practice as a (2) General Practitioner,
do hereby certify, on soul and conscience, that I have this day, at (3) County Police Office, Buccleuch Street, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Robert James Smith, Douglas-bank, Lochartbrigg, Dumfries, and that the said Robert James Smith, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane appearance and manner. Believes that there is something the matter with him because he cannot see other people walking & sitting. He is a little people talking about him. Has fecal lacks

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His mother, Charles Smith, informs me that he is sometimes mildly ex and threatens his mother with bo

Name and Medical Designation, Peter Murray Kerr M.B.

Place of Abode 20 Castle Street Dum

DATED this thirteenth day of June, — One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, George Robert Livingston, being (1) Bachelor of Medicine & Master of Surgery Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Comb Bank in the County of Dumfries, seen and personally examined Robert James Smith, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

George R. Livingston

DATED this thirtieth day of June — One thousand nine hundred & two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution ~~Asylum~~ Dumfries, to receive therein Robert James Smith to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother.

Signature and Address E. Smith, Douglas Bank, Locharbriggs, Dumfries.

Date 30th June 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire, Advocate, Sheriff Substitute of ~~the~~ (1) Dumfries & Galloway at Dumfries having had produced to me, with a Petition at the instance of (2) Charles Smith, Mason Douglas Bank, Locharbriggs, Dumfries Certificates under the hands of George Robert Livingston, and Peter Murray Kerr being two Medical Persons duly qualified in terms of an Act intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert James Smith, Douglas Bank, Locharbriggs, Dumfries (grocer) and that the said Robert James Smith, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert James Smith ~~as~~ a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert James Smith which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this First day of July, — One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution at Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo: Campion

No. 8900.
Robert James Smith.
Adm: 30 June 1902.

25 (

APPLICATION TO THE
TRANSFER OF A

I the undersigned Ch
being desirous to transfer
at present a Patient in
the Asylum at
Lichton Re
beg to submit the subjoined
Medical Certificate with respe

STAT

1. Christian] Name and Surna
length, .

2. Sex and Age, .

3. Married, Single, or Widowe

4. Condition of Life, and Pres
(if any), .

5. Religious Persuasion, so far

6. Parish to which the Lunatic
Chargeable, .

7. Christian Name and Surn
of Abode of nearest kin
the Patient, and degree
(if known), and whether
the Family known to be
Insane, .

I certify that, to the best
and I hereby make Applicatio
Lunacy to the transfer of the

(To be signed by the

Dated this 23rd
hundred and five

N.B.—The foregoing pa
follows, are required for the
to which the Patient is to be

[illegible]—May 1901.

16,227.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

GENERAL BOARD OF LUNACY
24 JUN 1902
SCOTLAND

I the undersigned Charles J. Thorburn being desirous to transfer Mrs Maria Thorburn at present a Patient in Mavisbank Asylum and (¹) detained at my instance from the said Asylum to the Crichton Royal Institution, Dumfries, beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

(¹) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Maria Thorburn
2. Sex and Age,	Female, 56
3. Married, Single, or Widowed,	Married
4. Condition of Life, and Previous Occupation (if any),	Gentlewoman
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	—
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	Lt.Col. Thorburn Shambellie Dumfriesshire.

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(*To be signed by the Applicant*) C. J. Thorburn

(²) Husband

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 23rd day of June One thousand eight hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

T. & A. C.—May 1898.

No. 8900.

MEDICAL CERTIFICATE.

I, the undersigned George R. Wilson

(1) Name Asylum.

hereby certify that I have this day at (1) Mavisbank Asylum personally examined Maria Thorburn who has been a

(2) Insert Date of Admission.

Patient in said Asylum since (2) 31st October, 1893 and I certify that the said Patient is a person of unsound mind, (3) not epileptic, (3) not suicidal,

(3) Insert "is," or "is not," as the case may be.

(3) not dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State.

the Patient, that (4) she is stuperose, and has delusions as to her own and other peoples identity and as to contamination which she believes her neighbours inflict on her

(5) Describe Bodily State.

and with respect to the Bodily State of the Patient, that (5) they are fairly good.

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Crichton Royal Institution Asylum inadvisable; and

(6) Insert "the following are," or "there are no," as the case may be.

I further certify that (6) there are no facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient :—

(Name) George R. Wilson

(Medical Qualification) Doctor of medicine

(Date) 23rd June 1902.

No 8901. Maria Thorburn. Adm. 30 June 1902.

SANCTION BY THE BOARD OF LUNACY.

(*Under this Sanction a Patient may be Transferred without an Order of the Sheriff.*)

The foregoing Application having been made to the Board to authorize the transfer

of Mrs Maria Thorburn

from Mavisbank Private Asylum

to Crichton Royal Institution, Dumfries ,

and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

W. Wd Reece Secretary.

Commissioner.

DATED at Edinburgh, this 24th day of June, One thousand ~~eight~~ nine hundred and two.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

27th November, 1890.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of Dumfries and Galloway *and his Substitutes,*—

The Petition of James Mc William Inspector of Poor Kirkcowan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Nicholson Farm Servant your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Nicholson to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) James Mc William

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this First (4) day of July One thousand nine hundred and two years

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Nicholson
2. Sex and Age,	Male 20 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farm Service
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Village of Kirkcowan
7. Place where Found and Examined,	Fathers House Kirkcowan
8. Length of time Insane,	
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment [name of *Establishment into which last received, and Year of Reception or approximation thereto*],	
12. Duration of Existing Attack,	a few days
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkcowan
18. Date of becoming Chargeable,	First July 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Nicholson Father residing in Kirkcowan Village no
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this First day of July One thousand nine hundred and two

(To be signed by the Party applying) James Mc William

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Stothart Wills being a (1) Licentiate of the Royal College of Surgeons of Phys and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) Main St in the County of Kirkcowan separately from any other Medical Practitioner, visited and personally examined (4) John Nicholson (Pauper) and that the said John Nicholson is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He talks incoherently & imagines that a man wrapped in a white sheet was following him, becomes violent & contradicted

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His elder brother informs me that during the whole night he wanders up & down his room & talks nonsense constantly; imagining that some person or persons are following him; he also becomes very violent when opposed or held by him.

Name and Medical Designation, Robert S Thart Wills. L.R.C.P.S

Place of Abode, Kirkcowan

DATED this First day of July One thousand ~~eight~~ hundred and Two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Mc Donald Selby being a (1) Bachelor of Medicine and Master in Surgery and being in actual practice as a (2) General Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) main St Kirkcowan in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) John Nicholson (Pauper) and that the said John Nicholson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He talks incoherently: He is constantly worried about a man in a white sheet who follows him and whom he imagines wishes to do him bodily harm

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His mother states to me that he wandered from home three days ago and was found many miles from home lying asleep in the road. His brother stated that he became violent without cause

Name and Medical Designation, Wm. Mc D Selby M.B. &c

Place of Abode Portillian

DATED this 16th day of July One thousand ~~eight~~ hundred and Two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Mackie (3) Sheriff Substitute
of the (3) Sheriffdom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) James M'Killam
Inspector of Poor Kirkcowan
Certificates under the hands of Robert Gothard Wells L.R.C.P.I.S. Kirkcowan
and William M'Dowall Selby M.B.C.M. Portwilliam, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
John Nicolson, farm Servant Kirkcowan and that the said
John Nicolson is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Nicolson as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Nicolson which accompanied the said Petition.

DATED this second day of July One thousand ~~eight~~ nine hundred and and two.

Wm Mackie

To the Superintendent of the (7) Southern Counties Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8902.
John Nicholson.
(Kirkcowan)
Adm. 3 July 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~of the (1)~~ County of Dumfries and Galloway, and his Substitutes, at Dumfries: —

The Petition of James Morrison, Inspector of Poor Dryfesdale Lockerbie:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Jardine,

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Jardine, to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) James Morrison

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 3rd (3) day of July, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Jardine.
2. Sex and Age,	Female 60 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Charwoman.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	4 Ivy Place, Lockerbie.
7. Place where Found and Examined,	do. do. do.
8. Length of time Insane,	In a nervous condition for 3 months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (3)	Not previously treated.
12. Duration of Existing Attack,	about 3 months.
13. Supposed Cause,	Fright.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	said to be.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dryfesdale Parish
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Thomas Scholar 4 Ivy Place, Lockerbie. Sister — do. —
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(3) Patient has been previously in an Asylum, state date of latest admission. If previously under treatment elsewhere, state when.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of July, One thousand nine hundred and two years.

(*To be signed by the party applying*) James Morrison.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George Irving,
being a (1) Doctor of Medicine & Master in Surgery
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 4 Ivy Pl
Lockerbie, in the County
Dumfries, separately from any other Medical Practitio
visited and personally examined (4) Margaret Jardine, Pauper,
4 Ivy Place, Lockerbie, and t
the said Margaret Jardine, Pauper, is a (5) person of u
mind, and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is nervou restless, always on the move, can't stay in House by herself. She is afraid that s is going to happen She speaks almost After whole conduct & behaviour are fee

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Scoular 4 Ivy Place informs m Magaret Jardine is not safe to be with as she has spoken to her about 10 times

Name and Medical Designation, George Irving M
Place of Abode, ~~July 3~~ Lockerbie
Dated this second day of July, One thous
nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Peter mackenzie Reid,
being a (1) Bachelor of Medicine & Bachelor of Surg
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Crichton R
Institution, in the County
Dumfries, separately from any other Medical Practitio
visited and personally examined (4) Margaret Jardine, Lau
4 Ivy Place Lockerbie, and t
the said Margaret Jardine, Pauper, is a (5) person of u
mind and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She leaves h at night. She does not know day of w or the year. She is constantly afraid that shall do harm to herself or her friends. Times her suicidal impulses are strong & life is made miserable by constant fear of the

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Foolish in behaviour. Lifts things throws at others in house & dangero be near

Name and Medical Designation, Peter mackenzie R
Place of Abode, Crichton Royal Institute
Dated this Third day of July, One thous
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Mackenzie Reid, being (1) Bachelor of Medicine Bachelor of Surgery, hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution in the County of Dumfries, seen and personally examined Margaret Jardine, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Peter Mackenzie Reid M.B. C.M.B.

DATED this Third day of July, One thousand nine hundred and Two Years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Margaret Jardine to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Thos Morrison Lockerbie

Date 3rd July 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of the (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) James Morrison, Inspector of Poor, Dryfesdale, Lockerbie, Certificates under the hands of George Irving and Peter Mackenzie Reid, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Margaret Jardine, 2 Ivy Place, Lockerbie, and that the said Margaret Jardine, is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Jardine as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Jardine, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Third day of July One thousand nine hundred and two years.-

To the Superintendent of the (1) Public *Asylum of* Crichton Royal Institution, at Dumfries

[Signature] Geo. Campion

(1) Public, District, Parochial, or Private.

No. 8903.

Margaret Jardine.

(Wyldesdale)

Admr. 3 July 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the~~ (2) of Dumfries & Galloway — and his Substitutes, — at Dumfries.

The Petition of Henry Todd, Agent, 99, Eglantine Avenue, Belfast,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Harriette Gunning Todd, Private Life

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Harriette Gunning Todd to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Henry Todd

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fifth (4) day of July — One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Harriette Gunning Todd
2. Sex and Age,	Female. 26 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Private Life.
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	99 Eglantine Avenue. Belfast
7. Place where Found and Examined,	Dr Macorma. 9 Victoria St. Belfast
8. Length of time Insane,	Observed peculiar about 2 years ago
9. Whether First Attack,	The above was the first time any thing was observed wrong.
10. Age (if known) on First Attack,	about 24 years.
11. When and where previously under Examination and Treatment (5)	Dr M'Connell. College Square East Belfast
12. Duration of Existing Attack,	March. 1902
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	Occasionally
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Henry Todd 99 Eglantine Ave. Belfast Relationship - Father
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fifth day of July — One thousand nine hundred and two

(*To be signed by the party applying*) Henry Todd

A. C.—March 1902.

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Andrew McConnell
being a (1) Licentiate of Royal College of Surgeons & Physicians Edt
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 99 Eglantine
Belfast in the County
Antrim — separately from any other Medical Practitioner
visited and personally examined (4) Harriette Gunning Todd
and th
the said Harriette Gunning Todd — is a (5) Insane Pers
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followi
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Complete change
mo
Expression of Countenance — Admission of flatt
against her — Says servant against her.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Loss of memory occasional violence — Hat
of step sister and Father.

Name and Medical Designation, Andrew McConnell LRCS

Place of Abode, 12 College Square North Belfa

DATED this second day of July One thousa
nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John M. Macbormac
being a (1) Doctor of Medicine of the University
Durham Physician
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3) 31, Great
Victoria St, Belfast in the County
Antrim separately from any other Medical Practitione
visited and personally examined (4) Harriett Gunning Todd,
of Private Life, 99, Eglington Avenue, Belfast and th
the said Harriett Gunning Todd is a (5) person of
unsound mind and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followi
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Mother, Brother,
& servants persuade her, he about her posture be
intolerable, cannot live longer at home, f
there she is in Hell.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her Father, Mother, Brother, & Sister
have told me that she believes every th
persecuting her, that she is impotent,
sometimes uncontrollable, & that she
attempted Suicide with a table knife in

Name and Medical Designation, John M. Macbormac

Place of Abode, 31 G. Victoria Street, Be

DATED this 4th day of July One thousa
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Mackenzie Reid
being (1) Bachelor of Medicine Bachelor of Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution,
in the County of Dumfries, seen and personally examined
Harriette Gunning Todd, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Peter M Reid MB ChB

Dated this fourth day of July One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution
Asylum to receive therein Harriette Gunning Todd Dumfries
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Henry Todd 99 Eglantine Ave. Belfast

Date 4th July 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary Sheriff-Substitute
of ~~the~~ Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (4) Henry Todd Agent
99 Eglantine Avenue, Belfast.
Certificates under the hands of Andrew McConnell,
and John M. Macdonnae, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Harriette Gunning Todd 99 Eglantine Avenue, Belfast, (Sister daughter) and that the said Harriette Gunning Todd is a (6) insane person, a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Harriette Gunning Todd as a Patient into the (7) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Harriette Gunning Todd, which accompanied the said Petition.

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(4) Insert Name and Designation.
(5) Describe him, and if a Pauper, state so.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, Parochial, or Private.

Dated [at Dumfries] this Seventh day of July, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries

[*Signature*] John Clerk

(7) Public, District, Parochial, or Private.

No. 8904.

Harriette Running Todd

4 July 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (1) Dumfries and Galloway — *and his Substitutes,—at* Dumfries

The Petition of Thomas Kennedy: Miller: Drumeckan. Dromore: Co: Dom. Ireland.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Kennedy.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Kennedy to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Thomas Kennedy

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (3) day of July — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Kennedy.
2. Sex and Age,	male. 41
3. Married, Single, or Widowed,	Singl.
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Drumeckan. Dromore. Co Dom.
7. Place where Found and Examined,	
8. Length of time Insane,	Four months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	41.
11. When and where previously under Examination and Treatment (5)	Never under treatment before.
12. Duration of Existing Attack,	Four months.
13. Supposed Cause,	Ill health.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Doubtful
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Kennedy. Brother Drumeckan. Dromore Co. Dom. None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Ninth — day of July — One thousand nine hundred and two years.

(To be signed by the party applying) Thomas Kennedy

P. p.

A. C.—March 1902.

MEDICAL CERTIFICATE, No. I.

(2) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(3) Physician or Surgeon, *or otherwise, as the case may be.*

(4) *Insert the street and number of the house (if any), or other like particulars.*

(5) *Insert Designation and Residence, and if a Pauper state so.*

(6) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(7) *State the facts.*

I, the undersigned, John McCaw
being a (2) MD. R.U.I.
and being in actual practice as a (3) Physician
do hereby certify, on soul and conscience, that I have this day, at (4) Drumsk
Dromore, Co. Down. in the County
separately from any other Medical Practitioner
visited and personally examined (5) John Kennedy, Miller
Drumsk, Co. Down. and th
the said John Kennedy is a (6) person of
unsound mind and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followin
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (7)

Dull & depressed: suspicious in manner
& has many morbid fancies

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, J. McCaw.

Place of Abode, 74. Dublin Road - Bel

DATED this 9th day of July One thousan
nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(2) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(3) Physician or Surgeon, *or otherwise, as the case may be.*

(4) *Insert the street, and number of the house (if any), or other like particulars.*

(5) *Insert Designation and Residence, and if a pauper state so.*

(6) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(7) *State the facts.*

I, the undersigned, Alexander Thomson
being a (2) Doctor of Medicine of Glasgow
University and Surgeon
and being in actual practice as a (3) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (4) the
Crichton Royal Institution
Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (5) John Kennedy, Miller,
Drumphae, Dromore Co. Down and the
the said John Kennedy is a (6) person
of unsound mind — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (7) Says he has Com-
mitted sins for which he cannot be forgiven; i
people know this, and look on him with suspici
talks about these things in a confused and
incoherent manner.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 27 Castle St., Dumfries

DATED this Seventh day of July One thousa
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff)

I, the undersigned, John McCaw being (1) M.D. R.U.I. hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Institution in the County of Dumfries, seen and personally examined John Kennedy, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

J. McCaw

DATED this 9th day of July One thousand nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein John Kennedy to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Thomas Kennedy Drumsleddle Dromore Co Down

Date 9th July 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson (1) Sheriff-Substitute of ~~the~~ Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (2) Thomas Kennedy, Miller, Drumsleddle, Dromore, Co. Down, Ireland, Certificates under the hands of John McCaw, and Alexander Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) John Kennedy, Drumsleddle, Dromore, Co. Down, Ireland, (Patient's Brother) and that the said John Kennedy is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Kennedy as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize you to cause Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Kennedy, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twelfth day of July, One thousand nine hundred and two years.

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries.

[*Signature*] Geo. Lampson

(6) Public, District, Parochial, or Private.

No. 8905.

John Kennedy.

Adm: 9 July 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward-Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes, at Dumfries.*

The Petition of William Clarke, Inspector of Poor, Lochmaben humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander S. Niven your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander S. Niven to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other necessity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) William Clarke

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Ninth (4) day of July — One thousand nine hundred and Two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Alexander Shepherd Niven
2. Sex and Age,	Male, 35 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Tailor (Journeyman)
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Highlal
7. Place where Found and Examined,	Highlale
8. Length of time Insane,	6 months since first symptoms
9. Whether First Attack,	First
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	Not previously under examination or treatment not known (was in India)
12. Duration of Existing Attack,	—
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lochmaben
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mary Niven, Mother Highlal
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Ninth day of July — One thousand nine hundred and two

(To be signed by the party applying) William Clarke

A. C.—August 1901. P. D.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Norman Reid of Medicine of Glasgow Univ being a (1) Doctor

and being in actual practice as a (2) General Practitioner

do hereby certify, on soul and conscience, that I have this day, at (3) Highfield Holmahen in the Coun Dumfries separately from any other Medical Practitio visited and personally examined (4) Alexander Shepherd Nixon, Tailor, Highfield - Pauper Holmahen and the said Alexander Shepherd Nixon is a (5) person of Unsound mind and a proper person to be deta under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He has a sus Incessantly looks, does not answer when spoke Cannot give any reason for his movements and a such, says he ought to be better fed, that he is tire his mother and will not stand her any longer, in dread he is ill used which is a delusion

2. Other facts (if any) indicating Insanity communicated to me by others: (7) May Nixon his mother says that he rushed ou yesterday without any provocation and struck her the room out of the house to some neighbours when he threw a large stone at her. She has not since been to return to her house

Name and Medical Designation, Norman Reid

Place of Abode, Holmahen

DATED this 9th day of July — One thou nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Robt. B. Campbell

being a (1) M.B.C.M. of Edinburgh University

and being in actual practice as a (2) Physician

do hereby certify, on soul and conscience, that I have this day, at (3) The Cre Royal Institution. Dumfries — in the Coun Dumfries — separately from any other Medical Practiti visited and personally examined (4) Alexander Shepherd Nixon, Tailor Highfield Lochmaben, a pauper and the said Alexander Shepherd Nixon is a (5) person of unsound mind and a proper person to be deta under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

He labours under Melancholia with delus of suspicion & persecution - Imagines that pe purposely avoid him & that they are constantly ab about him

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Willm. Clark. Inspector of Poor. Lochmaben info that he has been peculiar & suspicious for some time yesterday he assaulted his mother, without provocation

Name and Medical Designation, Robt. B. Campbell M

Place of Abode, Crichton Royal Institution &

DATED this Ninth day of July — One thou nine hundred and two —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas Reid of Glasgow University being (1) a Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) Hightae in the County of Dumfries, seen and personally examined Alexander Shepherd Niven, tailor, Hightae, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

Thomas Reid. M.D.

DATED this 9th day of July — One thousand nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Alexander Shepherd Niven to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor of Parish of Settlement

Signature and Address William Clarke, 53 High St. Coalmaker.

Date 9th July 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (1) Sheriff-Substitute of the ~~County~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) William Clarke, Inspector of Poor, Coalmaben, Certificates under the hands of Thomas Reid, and Robert B. Campbell being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) him and that he is a Pauper, Shepherd Niven, Tailor, Hightae, Coalmaben (a pauper) and that the said Alexander Shepherd Niven is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Shepherd Niven — as a Patient into the (5) Public — Asylum of Southern Counties at Dumfries, and I authorize you — Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Shepherd Niven, — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(3) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Tenth day of July, One thousand nine hundred and two years.

To the Superintendent of the (5) Public, *Asylum of* Southern Counties Dumfries.

[Signature] Geo. Campion

(5) Public, District, Parochial, or Private.

No 8906.

Alexander S. Niven
(Lochmaben)
Adm: 9 July 1908.

[FORM A.]

35 and 36 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries & Galloway

and his Substitutes, at Dumfries.

The Petition of James Morrison Inspector of Poor Lochrutton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Thomas Rogerson of Park Square Lochrutton presently an inmate of Dumfries Infirmary.

your Petitioner's (1) Relative — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Thomas Rogerson — to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(To be signed by the Party applying) James Morrison

DATED this 10th — (2) day of July — One thousand ~~eight~~ two hundred and two.-

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

Christian Name and Surname of Patient at length,	Thomas Rogerson
Sex and Age,	Male 40 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Ostler
Religious persuasion, so far as known,	Protestant
Previous Place of Abode,	Park square Lochrutton
Place where Found and Examined,	Royal Infirmary Dumfries
Length of Time Insane,	a few days
Whether First Attack,	first attack
Age (if known) on First Attack,	40 years
When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception or approximation thereto,	—
Duration of Existing Attack,	a few days
Supposed Cause,	
Whether subject to Epilepsy,	yes
Whether Suicidal,	no
Whether dangerous to others,	yes - said to be
Parish or Union to which the Lunatic (if a pauper) is Chargeable,	Dryfesdale Parish
Date of becoming Chargeable,	10th July 1902
Christian Name and Surname, and place of abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been insane,	Not known
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this 10th — day of July — One thousand ~~eight~~ nine hundred and two

(To be signed by party applying) James Morrison

(1) The degree of relationship or capacity in which applicant stands to Lunatic.

(2) The date of the Petition must be within fourteen clear days after the dates of the Medical Certificate.

NB. This Form shall govern the keeping of the Register and Record of the Asylum and the Order of the Sheriff thereanent.

SC 8996

MEDICAL CERTIFICATE No. I.

I, the undersigned James C Gilchrist ——————
being a (1) Member of the University of Edinburgh + Bachelor of Medicine
and being in actual practice as a (2) Physician ——————
do hereby certify, on soul and conscience, that I have this day, at (3) Dumfries Galloway Royal Infirmary Dumfries — in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Rogerson — Park Square Lockerbie Pauper —————— and that the said Thomas Rogerson is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Extremely apathetic condition of mind. Speech very slow and incoherent. Gives incoherent answers to questions. Cannot remember important events in his life and ~~no other~~ his answers from time to time. Mind is evidently vacant. Moves hands in purposeless way. Has epileptic fits.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) It might be especially unmanageable, obstinately reticent, and has delusions - must so that he would walk thro' the window to smash "enemies" from he says. - communicated by Wife Eleanor. the right sides in this Infirmary. Has a habit of mut[illegible] but he cannot point to any, but walks [illegible] Communicated by Charge attendant in this Infirmary.

Name and Medical Designation, James C Gilchrist M.B.Ch
Place of abode, Liniyard Dumfries

DATED this tenth — day of July — One thousand nine ~~eight~~ hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise as the case may be.*
(3) *Insert the Street, and number of the house, (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information and from whom derived.*

MEDICAL CERTIFICATE No. II.

I, the undersigned Robt. B. Campbell ——————
being a (1) M.B. Ch. of Edinburgh University ——————
and being in actual practice as a (2) Physician ——————
hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution. Dumfries —— in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Thomas Rogerson. Pauper. Park Square, Lockerbie. a tramper —— and that the said Thomas Rogerson —————— is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He is confused + much unfitted mentally. Labours under delusions of identity + locality. He is epileptic. He is rambling + irrational in his statements. Memory much im

2. Other facts (if any) indicating Insanity communicated to me by others: (7) James Morrison. Inspector of Poor. Lockerbie. He that during the past week while an inmate of Dumfries Infirmary he has been violent, threatening + unmanageable

Name and Medical Designation, Robt. B. Campbell. M.B.
Place of abode, Crichton Royal Institution. D

DATED this Eighth — day of July — One thousand nine ~~eight~~ hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise as the case may be.*
(3) *Insert the Street, and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned James C. Gilchrist
being (1) Bachelor of Medicine & Surgeon of the University of Edinburgh (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries (2) State place of examination.
& Galloway Royal Infirmary Dumfries
in the County of Dumfries, seen and personally examined
Thomas Rogerson, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum, and is in a good state of bodily health at this date to be removed to the Asylum at Dumfries
And I further certify that the case of the said person is one of Emergency.

James C. Gilchrist

DATED, this tenth day of July One thousand ~~eight~~ nine
hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Thomas Rogerson
to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address, James Morrison Parish Council office Lockerbie

Date, 10th July 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute
of ~~the the County of~~ Dumfries and Galloway, at Dumfries, (1) Insert Name & Designation
having had produced to me, with a Petition at the instance of (1) James Morrison Inspector of Poor, Lockerbie,
Certificates under the hands of James C. Gilchrist,
and Robert B. Campbell, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Thomas Rogerson, Park Square, Lockerbie (2) Describe him, and if a Pauper, state so.
(a pauper),
and that the said
Thomas Rogerson is a (3) person of unsound mind (3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Thomas Rogerson as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize his Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Rogerson
which accompanied the said Petition.

DATED this Eleventh day of July One thousand ~~eight~~
hundred and two years. Five words deleted

Geo. Campion

To the Superintendent of the
Crichton Royal Institution for Lunatics, at Dumfries.

No. 8904.

Name, Thomas Rogerson -
(Dryfesdale)

Date of Admission, 10th July 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes,*— at Dumfries.

The Petition of William Dodgson. Crookings Farm - Penwortham - nr Preston

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Beatrice Margaret Dodgson.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Beatrice Margaret Dodgson to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(To be signed by the Party applying) William Dodgson

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (4) day of July One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Beatrice Margaret Dodgson.
2. Sex and Age,	Female, aged 29 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Household duties
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Crookings Farm, Penwortham, Nr Preston
7. Place where Found and Examined,	at home.
8. Length of time Insane,	about 3 months
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	28 years
11. When and where previously under Examination and Treatment (5)	Never
12. Duration of Existing Attack,	about 3 months
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	She is not chargeable to any Union
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Dodgson, Crookings Farm, Penwortham Nr Preston Her father - Not known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) Patient has previously in an Asylum, state date of latest admission. If previously under other treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eleventh day of July — One thousand nine hundred and two years.

(To be signed by the party applying) William Dodgson

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, David Turnbull Smith Bachelor of Medic
being a (1) Glasgow University & a Licentiate of the Roy
College of Surgeons Edinburgh
and being in actual practice as a (2) General Practitioner of Medic
do hereby certify, on soul and conscience, that I have this day, at (3) Brookings
Penwortham near Preston
Lancaster — separately from any other Medical Practitio
visited and personally examined (4) Beatrice Margaret Dodgso
and t
the said Beatrice Margaret Dodgson — is a (5) person of
Unsound Mind — and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is excited
appearance, and when spoken to, talks on to herself
incoherent language, about being no good, lazy and
to end her miserable life, afterwards she begins cry

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Ellen Dodgson (her mother) informs me she had threat
poison herself with Opium, she has tried to drown
in a cold bath, she has run away from home at pr
she is watching every opportunity to injure herself.

Name and Medical Designation, David Turnbull Smith

Place of Abode, 2 Fishergate Hill Preston

DATED this Tenth — day of July — One thousa
nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of medicine of Glasgow
University and Surgeon Physician and Surgeon
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3)
Crichton Royal Institution
Dumfries in the County
separately from any other Medical Practitione
visited and personally examined (4) Beatrice Margaret Dodgso
Stirtin, Brookings Farm, Penwortham nr Preston and th
the said Beatrice Margaret Dodgson is a (5) person
of Unsound mind — and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followi
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She appears ver
and depressed; says She wishes to put
an End to herself, as She cannot mak
herself useful, and do things as She
ought to do —

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.
Place of Abode, 27 Castle St, Dumfries

DATED this Eleventh day of July — One thousa
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Mackenzie Reid being (1) Bachelor of Medicine & Bachelor of Surgery hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution in the County of Dumfries —, seen and personally examined Beatrice Margaret Dodgson —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Peter M. Reid

Dated this Eleventh — day of July — One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Institution Dumfries Asylum to receive therein Beatrice Margaret Dodgson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ~~Wife~~ Father

Signature and Address William Dodgson Penwortham Preston

Date July 11th 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire. Advocate (1) Sheriff Substitute of the (2) Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (3) William Dodgson, Brookings Farm, Penwortham, nr Preston Certificates under the hands of David Turnbull Smith — and Alexander Thomson — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Beatrice Margaret Dodgson Brookings Farm Penwortham nr Preston Eldest Daughter and that the said Beatrice Margaret Dodgson is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Beatrice Margaret Dodgson — as a Patient into the (6) Public — Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Beatrice Margaret Dodgson — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated [at Dumfries —] this Twelfth — day of July One thousand nine hundred and two years.—

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution at Dumfries

(7) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8908.

Beatrice Maud Dodgson.

Adm: 11 July 1902.

25

APPLICATION TO THE
TRANSFER OF A

I, the undersigned
being desirous to transfer
as present a Patient in
detained at my
Southern Count

beg to submit the subjoined
Medical Certificate with respe

STA

1. Christian Name and Surn
length,

2. Sex and Age,

3. Married, Single, or Widow

4. Condition of Life, and Pre
(if any),

5. Religious Persuasion, so fa

6. Parish to which the Lunati
Chargeable,

7. Christian Name and Surn
of Abode of nearest k
the Patient, and degre
(if known), and whethe
the Family known to b
Insane,

I certify that, to the be
and I hereby make Applicat
Lunacy to the transfer of th

(To be signed by the

Dated this
hundred and

N.B.—The foregoing p
follows, are required for the
to which the Patient is to b

T. & A. C.—May 1894.

16,238.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

GENERAL BOARD OF LUNACY FOR SCOTLAND
1 JUL 92

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned John McCaig
being desirous to transfer Margaret Murphy
at present a Patient in Dundee Royal Lunatic Asylum, and (¹) detained at my instance from the said Asylum to the Southern Counties Asylum, Dumfries

(¹) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Margaret Murphy
2. Sex and Age,	Female 34.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	Stoneykirk
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	Mrs Dobbin, Balgills Cottage Blowplay Farm. - Sister

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(To be signed by the Applicant) John McCaig

(²) Inspector of Poor, Stoneykirk

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 24th day of June One thousand eight nine hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned James Rorie

(1) Name Asylum. hereby certify that I have this day at (1) Dundee Royal Lunatic Asylum personally examined Margaret Murphy who has been a

(2) Insert Date of Admission. Patient in said Asylum since (2) 5th March 1902 and I certify that

(3) Insert "is," or "is not," as the case may be. the said Patient is a person of unsound mind, (3) not epileptic, (3) not suicidal, (3) not dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State. the Patient, that (4) She is suffering from Monomania of persecution

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5)

it is good

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Southern Counties Dumfries Asylum inadvisable; and

(6) Insert "the following are," or "there are no," as the case may be. I further certify that (6) there are no facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient :—

(Name) James Rorie

(Medical Qualification) M. D. L.R.C.S.E

(Date) 3 July 1902

No. 8909
Margaret Murphy
(Kincardine)
Adm. 11 July 1902

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer

of Margaret Murphy

from Dundee Royal Asylum

to Crichton Royal Institution, Dumfries

and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

J W d Heriot Secretary

DATED at Edinburgh, this seventh day of July, One thousand ~~eight~~ nine hundred and two.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

5th March, 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (1) Shire~~
of Dumfries-Galloway, and his Substitutes, ~~at Dumfries.~~

The Petition of John Paterson, Inspector of Poor,

St Mungo's Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Marion Kerr, Ettrickholm, St. Mungo,

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Marion Kerr, to the Southern Counties Asylum, and to sanction her admission into the said Asylum.

J. Paterson

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this ~~Ninth~~ 15th day of July, One thousand ~~eight~~ hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

Christian Name and Surname of Patient at length,	Marion Kerr.
Sex and Age,	Female - 35 years.
Married, Single, or Widowed,	Single,
Condition of Life, and previous Occupation (if any),	Charwoman.
Religious Persuasion, so far as known,	Protestant.
Previous Place of Abode,	Ettrickholm.
Place where Found and Examined,	Do.
Length of time Insane,	2 Days.
Whether First Attack,	Yes.
Age (if known) on First Attack,	35 years.
When and where previously under Examination and Treatment,	
Duration of Existing Attack,	2 days.
Supposed Cause,	Mental worry.
Whether subject to Epilepsy,	No.
Whether Suicidal,	No.
Whether Dangerous to others,	No.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	St Mungo.
Date of becoming Chargeable,	15th July, 1902.
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Kerr, (Son), Cockafechan.
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 15th day of July, One thousand ~~eight~~ nine hundred and two years.

(*To be signed by Party applying*) J. Paterson

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, George Irving, ——
being a (1) Doctor of Medicine & Master in Surgery, —
and being in actual practice as a (2) Physician & Surgeon —
hereby certify, on soul and conscience, that I have this day, at (3) Ettrickhall
St. Mungo, ——— in the County of
Dumfries, —— separately from any other Medical Practitioner,
visited and personally examined (4) Marion Kerr, Pauper, Et
St Mungo, Dumfriesshire, ——— and that
the said Marion Kerr, Pauper, —— is a (5) Person of un
mind, ——— and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She refuses food
has delusions that her son is shot, that her
six children have all been murdered, & that
herself has to undergo an operation which will
have been done many years ago.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Miss Maxwell, ~~Informant~~ Ettrickholm, t
me that for some time back Marion Kerr has
everyone is poisoning her.

Name and Medical Designation, George Irving M.D

Place of Abode, Lockerbie

DATED this fifteenth day of July, —— One thousand ~~eight~~
hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, James Macdachlan ——
being a (1) Bachelor of Medicine & Master of Surgery
and being in actual practice as a (2) Physician & Surgeon —
hereby certify, on soul and conscience, that I have this day, at (3) Ettrickholm
Parish of St Mungo, ——— in the County of
Dumfries, —— separately from any other Medical Practitioner,
visited and personally examined (4) Marion Kerr, Pauper, ———
Ettrickholm, ——— and that
the said Marion Kerr, ——— is a (5) Person
of unsound mind, ——— and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Much depressed
[illegible] fully about her boy who was killed
[illegible] herself & about her sister's family
[illegible] who have all been murdered
[illegible] somewhat incoherent
[illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Maxwell, a neighbour states that she
[illegible] for some time that she appears
& is impressed that people wish to harm her

Name and Medical Designation, James Macdachlan M.B.

Place of Abode Lockerbie

DATED this fifteenth day of July, One thousand ~~eight~~
hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, George Irving,
being (1) Doctor of Medicine & Master in Surgery,
hereby certify, on soul and conscience, that I have this day, at (2) Ettrickholm, St. Mungo,
in the County of Dumfries, seen and personally examined
Marion Kerr, Pauper, St. Mungo,, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum, owing to a supposed good
And I further certify that the case of the said person is one of Emergency.

George Irving M.D

DATED this fifteenth day of July, One thousand ~~eight~~ nine
hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution
~~Asylum~~ to receive therein Marion Kerr,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, For Inspector of Poor.

Signature and Address Wm. Campbell, Bogside, Sundrigan

Date 15th July 1908.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (1) Sheriff-Substitute,
of the (2) Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (3) John Peterson,
Inspector of Poor, St. Mungo Lockerbie,
Certificates under the hands of George Irving,
and James Maclachlan being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Marion
Kerr, Ettrickholm, St. Mungo, (a pauper),
and that the said Marion Kerr, is a (5) person of
unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Marion Kerr, as a Patient into the (6) Public Asylum of Southern Counties, at Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Marion Kerr which accompanied the said Petition.

DATED [at Dumfries] this Sixteenth day of July,
One thousand nine hundred and two years.-

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries.

[*Signature*] Geo. Campion

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8910.

Ornation Slett.

(St. Onuago)

Adm: 15 July 1908

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) Crichton Royal Institution~~ of Dumfries & Galloway and his Substitutes,—at Dumfries.

The Petition of Margaret Stevenson

22 New Smithhill Street Paisley

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Reid Stevenson 22 New Smithhill Paisley your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Annie Reid Stevenson, Paisley to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other quality in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Margaret Stevenson

DATED this ~~Eighteenth~~ Fifteenth (4) day of July One thousand nine hundred and Five

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Annie Reid Stevenson
2. Sex and Age,	Female Twenty Six Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Housework
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	22 New Smithhill St. Paisley
7. Place where Found and Examined,	" " "
8. Length of time Insane,	Not known
9. Whether First Attack,	First Attack
10. Age (if known) on First Attack,	Twenty Six
11. When and where previously under Examination and Treatment (5),	At Home.
12. Duration of Existing Attack,	No
13. Supposed Cause,	Don't know
14. Whether subject to Epilepsy,	" "
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	No
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Margaret Stevenson 22 New Smithhill Street Paisley Mother
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If Patient has previously in an Asylum, state date of latest admission, approximate date to. If previously under other treatment, state.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this ~~18th~~ 19th day of July One thousand nine hundred and Five

(To be signed by the party applying) Margaret A. Stevenson

No. 8010

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Watt

being a (1) Bachelor of Medicine Glasgow Univers

and being in actual practice as a (2) Physician

do hereby certify, on soul and conscience, that I have this day, at (3) 22 Nee Smithhills Street, Paisley in the Coun Renfrew separately from any other Medical Practitio visited and personally examined (4) Annie Reid Stevenson, housework 22 nee Smithhills St Paisley and the said Annie Reid Stevenson is a (5) person of unsound mind and a proper person to be deta under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Delusions of sight e.g. that God has descende + dried up all the secretions of her body.
Delusion of hearing e.g. Young man particulars are calling her by name + addressing her as h wife.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Threatened to jump over pier at Kirn abo a week ago. also to jump out of window railway carriage on same day. Related by sist noker.

Name and Medical Designation, Thomas Watt, M.B.

Place of Abode, 44 High Street Paisley

DATED this fifteenth day of July One thous nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson

being a (1) Doctor of Medicine of Glasgow University and Surgeon Physician & Surgeon

and being in actual practice as a (2) the Crichton Royal Institution in the County Dumfries separately from any other Medical Practition visited and personally examined (3) Annie Reid Stevenson Spinster, 22 New Smithhill St., Paisley and t the said Annie Reid Stevenson is a (5) person of unsound mind and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is in a nervous State, about being dried up inside; dreads that something more will happen to her. And that she would rather not live: Sometimes felt something forcing her to jump into the water when visiting Kirn.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D

Place of Abode, 27 Castle St., Dumfries

DATED this Eighteenth day of July One thousa nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas Watt being (1) Bachelor of Medicine and Master in Surgery (Glasgow Univ.) hereby certify, on soul and conscience, that I have this day, at (2) Paisley in the County of Renfrew, seen and personally examined Annie Reid Stevenson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution, Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Thomas Watt.

DATED this Fifteenth day of July One thousand nine hundred and Two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Annie Reid Stevenson 22 New Smithhill St Paisley to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Margaret Stevenson 22 New Smithhill St Paisley

Date 18th July 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (1) Sheriff-Substitute of ~~the~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Margaret Stevenson 22 New Smithhill Street, Paisley, Certificates under the hands of Thomas Watt, and Alex. Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Annie Reid Stevenson 22 New Smithhill Street, Paisley (Sister Daughter) and that the said Annie Reid Stevenson is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Annie Reid Stevenson as a patient into the (5) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Annie Reid Stevenson which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Nineteenth day of July One thousand nine hundred and two years.

To the Superintendent of the (6) Public *Asylum of* Crichton Royal Institution Dumfries.

[*Signature*] Geo. Campion

(6) Public, District, Parochial, or Private.

No. 8911.
Annie Reid Stevenson
Aden: 18 July 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Dumfries & Galloway at Kirkcudbright *and his Substitutes,—*

The Petition of Samuel Rugg Inspector of Poor of the parish of Kelton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Kissock your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Kissock to the Southern Counties asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Samuel Rugg

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 18th (4) day of July One thousand nine hundred & two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Janet Kissock
2. Sex and Age,	24 - Female.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Castle Douglas
7. Place where Found and Examined,	Castle Douglas
8. Length of time Insane,	One week
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	✓
11. When and where previously under Examination and Treatment (5)	✓
12. Duration of Existing Attack,	One week
13. Supposed Cause,	Worry, & disappointment in marriage
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kelton
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Kissock Carting work Cottage Castle Douglas. None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	No

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 18th day of July One thousand nine hundred & two

(To be signed by the party applying) Samuel Rugg P.P.

T. & A. C.—April 1900.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Norrie
being a (1) ~~a General Practitioner~~ Graduate of Medicine
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Carlingwark
Hill Castle Douglas in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Janet Kissock Carlingwark
Castle Douglas Pauper and that
the said Janet Kissock is a (5) Pauper of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
She suffers from delusions. And she is persecuted & evil stories circulated about her. That she ought to be living being a lineal descendant of the previous ones. also that she is heir to a fortune & which she is being defrauded

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her father says she is becoming rather violent, imagines she is heir to this throne & has other delusions

Name and Medical Designation, R B Norrie M.B.C.M.

Place of Abode, Castle Douglas

DATED this Seventeenth day of July One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Edward Bateman Hutchinson
being a (1) Graduate in Medicine of the University of Edinburgh
and being in actual practice as a (2) General practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Carlingwark
Castle Douglas in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Janet Kissock. Carlingwark
Castle Douglas Pauper and that
the said Janet Kissock is a (5) person of unsound
mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She talks of
Whitsuntide – She insists that I was seen
under an assumed name – She believes
that she is the lawful heir & the the

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Kissock, Carlingwark Village, her mother
informed me that she displays symptoms
violence at times – that she attempted
attack her mother –

Name and Medical Designation, Edward B Hutchinson M.B.C.M.

Place of Abode Castle Douglas N.B.

DATED this seventeenth day of July One thousand nine hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Laurence Twaddyman Napier Esq. Sheriff Substitute of Dumfries
~~of the~~ (1) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (2) Samuel Rigg
Certificates under the hands of R.B. Lorraine
and Edward D. Heator being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Kissock. Pauper.
and that the said Janet Kissock is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Kissock as a patient into the Dumfries and Galloway Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Kissock which accompanied the said Petition.

DATED [at Kirkcudbright] this eighteenth day of July One thousand nine hundred and two years.

To the Superintendent of the (6) Dumfries and Galloway *Asylum of* Dumfries

[*Signature*] Laurence T. Napier

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

No. 8912

Janet Hiscock
(Skelton)

Adm: 18 July 1902

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[Form A]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries Humbly sheweth that it appears from the subjoined Statement, and accompanying Medical Certificates, that John Houston, ——— your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Houston ——— ——— to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) Miles Mc Innes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty fourth — (*) day of July ———
One thousand ~~eight~~ nine hundred and two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Houston.
2. Sex and age,	Male, — 16 4/12 yrs.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Nil.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous place of abode,	Dumfries Poorhouse.
7. Place where found and examined,	Dumfries Poorhouse.
8. Length of time Insane,	a few days.
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	16 yrs.
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	No where.
12. Duration of Existing Attack,	Not known,
13. Supposed Cause,	Not known.
14. Whether Subject to Epilepsy,	Yes.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Ronaldsha.
18. Date of becoming Chargeable,	29th May, 1900.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Margaret Houston, mother, residing in Quail Vennel, Dumfries. Not known.
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	None.

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty third — day of July, — One thousand ~~eight~~ nine hundred and two years. —

(To be signed by the party applying) Miles Mc Innes

MEDICAL CERTIFICATE, NO. I.

(*) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the Street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Peter Murray Kerr
being a (*) Bachelor of Medicine and Master in Surgery
University of Edinburgh,
and being in actual practice as a (*) General Practitioner,
do hereby certify, on Soul and Conscience, that I have this day, at (*) Parkhouse,
Dumfries, Dumfries, in the County of
separately from any other Medical practitioner
visited and personally examined (*) John Houston, Pauper,
Parkhouse, Dumfries, and that
the said John Houston, is a (*) person of unsound
mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(*) *State the facts.*

1. Facts indicating Insanity observed by myself: (*)

His appearance and manner.
He is an epileptic.
Has great loss of control.
Becomes violent excited at time

(*) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (*)

the governor. Mr Holmes informs me that on sudden impulse he runs away from the house and manifests ab

Name and Medical Designation, Peter Murray Kerr M.B.Ch.

Place of Abode, 32 Castle Street Dumfries

DATED this twenty first day of July One thousand ~~nine~~ hundred and two years.

MEDICAL CERTIFICATE, NO. II.

(*) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the Street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, George Robert Livingston
being a (*) Bachelor of Medicine & Master in Surgery,
and being in actual practice as a (*) Physician & Surgeon,
do hereby certify, on Soul and Conscience, that I have this day, at (*) Parkhouse,
Dumfries, Dumfries, in the County of
separately from any other Medical Practitioner,
visited and personally examined (*) John Houston, Pauper,
Parkhouse Dumfries, and that
the said John Houston is a (*) person of
unsound Mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(*) *State the facts.*

1. Facts indicating Insanity observed by myself: (*)

His insane appearance & manner
He is a chronic epileptic.
He is very excitable.

(*) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (*)

Name and Medical Designation, Geo R. Livingston

Place of Abode, 35 George Street Dumfries

DATED this twenty third day of July One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr —
being (1) Bachelor of Medicine, Bachelor of Surgery, (1) State Medical qualification.
hereby certify, on Soul and Conscience, that I have this day, at (2) Portland Terrace Dumfries, (2) State place of Examination.
in the County of Dumfries, seen and personally examined John Houston, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum. ×

And I further certify that the case of the said person is one of Emergency.

× and is in a sufficiently good state of bodily Health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr.

Dated this twenty first day of July, — One thousand ~~eight~~ hundred and two years. —

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein John Houston
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address, Miles Mc Jones 28 Queen St, Dumfries

Date, 23rd July, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Lumpton, Esquire, Advocate, — Sheriff Substitute of ~~the County of~~ Dumfries and Galloway, at Dumfries —
having had produced to me, with a Petition at the instance of (1) Miles McC. Jones, Inspector of Poor, Dumfries, (1) Insert Name and Designation.
Certificates under the hands of Peter Murray Kerr —
and George Robert Livingston, —, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (1) John Houston, The Poorhouse, Dumfries a pauper, (1) Describe him, and if a Pauper, state so.
and that the said John Houston, is a (2) person of unsound mind, (2) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said John Houston, — as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise his Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said John Houston, — which accompanied the said Petition.

Dated this twenty fourth day of July — One thousand eight hundred and two years. —

Geo. Lumpton

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8913

Name John Houston
(Thorneywald)

Date of Admission 28 July 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,* — at Dumfries:

The Petition of Edwin Lawrence Mackenzie, Prospect Villa, Lenzie;

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that your Petitioner's (3) Ruby Laurence Mackenzie, Lester, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ruby Laurence Mackenzie to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Edwin L. MacKenzie

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty fourth day of — July — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Evelyn Laurence MacKenzie.
2. Sex and Age,	Female. Thirty three.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	None.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Helensburgh.
7. Place where Found and Examined,	Prospect Villa Gangalen Avenue, Lenzie.
8. Length of time Insane,	Uncertain.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	Yes.
11. When and where previously under Examination and Treatment (5)	None.
12. Duration of Existing Attack,	14 days.
13. Supposed Cause,	Epilepsy.
14. Whether subject to Epilepsy,	Yes.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Helen McKenzie Prospect Villa, Gangalen Avenue, Lenzie. None known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If Patient has been previously in an Asylum, state date of latest admission. If not previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty fourth day of July — One thousand nine hundred and two years.

(*To be signed by the party applying*) Edwin Laurence MacKenzie.

P.A.

& A. C.—March 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an Idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander G. McKibbin, being a (1) M.D. Edinburgh ~~graduate~~ and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Prospect Lenzie Dumbarton, separately from any other Medical Practitioner visited and personally examined (4) Evelyn Lawrence Mackenzie Prospect Villa, Lenzie, and the said Evelyn Lawrence Mackenzie is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is subject to epilepsy & is maniacally excited as a result of a series of fits. She is dangerous to those around her & has numerous delusions. She hears voices & believes all kinds of terrible things are going to happen.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She has taken a dislike to her Mother's Sister & unmanageable at home any other time.

Name and Medical Designation, Alex. G. McKibbin M.D.

Place of Abode, Glenly Lenzie

DATED this 23rd day of July — One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Hamilton C. Mann being a (1) M. B. C.M. Edin. Univ. and being in actual practice as a (2) physician do hereby certify, on soul and conscience, that I have this day, at (3) Prospect Villa, Lenzie, Dumbarton, separately from any other Medical Practitioner visited and personally examined (4) Evelyn Lawrence Mackenzie Prospect Villa, Lenzie, and the said Evelyn Lawrence Mackenzie is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is irritable excitable. Her manner & conversation are dangerous & threatening. She is suspicious & delusional. She accuses her friends & the nurses of her & attempting to poison her.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Hamilton C. Mann

Place of Abode, Woodville, Lenzie

DATED this 22nd day of July — One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, A. G. McIntyre M.D. ——— being (1) a General Practitioner hereby certify, on soul and conscience, that I have this day, at (2) Prospect Villa, Lenzie, in the County of Dumbarton ——, seen and personally examined Evelyn Laurence Mackenzie ——, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution, Dumfries,

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

A. G. McIntyre M.D.

DATED this 23rd day of July —— One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Evelyn Laurence Mackenzie, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, brother

Signature and Address Edwin Laurence MacKenzie, Prospect Villa. Lenzie.

Date 23rd July 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of the ~~Stewartry~~ Dumfries & Galloway at Dumfries ——, having had produced to me, with a Petition at the instance of (4) Edwin Laurence MacKenzie, Prospect Villa, Lenzie ——, Certificates under the hands of Alex G. Mc-Intyre, —— and Hamilton L. Mair, —— being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Evelyn Laurence MacKenzie, Prospect Villa, Lenzie and that the said Evelyn Laurence MacKenzie, is a (6) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Evelyn Laurence MacKenzie as a Patient into the (7) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Evelyn Laurence MacKenzie, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(4) State whether a County or Stewartry.

(5) Insert Name and Designation.

(5) Describe him, and if a Pauper, state so.

(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(7) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty fifth day of July, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, at Dumfries

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8914.

Evelyn Laurence Charlesworth

Adm: 24 July 1908.

16,251.

[FORM B.]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF PATIENT FROM ONE ASYLUM TO ANOTHER.

GENERAL BOARD OF LUNACY FOR SCOTLAND 16 VIII 93

I, the undersigned Henry Littledale Dick Wiston Manse Lamington NB. with the Consent of Company of Lunacy Co. Edinburgh Curator Bonis & Brother being desirous to transfer John Crichton Dick

at present a Patient in Craig House Morningside, and(1) whose nearest known relative I am

from the said Asylum to the Crichton Royal Asylum

beg to submit the subjoined Statement of Particulars regarding the said Patient, and a Medical Certificate with respect to the mental and bodily condition of the said Patient:—

(1) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length	John C. Dick.
2. Sex and Age	Male 52yrs.
3. Married, Single, or Widowed	Married
4. Condition of Life, and previous Occupation (if any)	Minister
5. Religious Persuasion, so far as known,	Protestant - Minister of the Established Church of Scotland
6. Parish to which the Lunatic (if a Pauper) is Chargeable	Edinburgh
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known) and whether any member of the Family known to be, or to have been insane	Henry Littledale Dick Brother Wiston Manse Lamington None.

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the Authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(*To be signed by the Applicant*) Henry Littledale Dick

(2) Brother James Craig Curator Bonis

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this eleventh day of July One thousand eight hundred and ninety-three years.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Thomas Smith Clouston Royal Edinburgh Asylum
hereby certify that I have this day at (1) personally examined John C. Dick who has been a
Patient in said Asylum since (2) 10th October 1901 and I
certify that the said Patient is a person of unsound mind, (3) not epileptic, (3)
not suicidal, (3) not dangerous to others, and (4) he is still a person
fearful & timorous character, clinically much improved since admission
and with respect to the Bodily State of the Patient, that (5) he is now fairly
well nourished, has a good appetite, sleeps well, takes exercise
& is not ill.
and that there is nothing in the Mental or Bodily state of the Patient to make removal
to the (1) Crichton Royal Institution Asylum inadvisable;
and I further certify that (6) the following facts known
to me as to the past history of the Patient, bearing upon risk of suicide or danger to
others, which I think ought to be brought under the notice of those who are to have
charge of the Patient:— When at first admitted he was very
much depressed & made several attempts
to commit suicide & was kept under
restraint.

(1) Name Asylum.

(2) Insert Date of Admission.

(3) Insert "is," or "is not," as the case may be.

(4) Describe Mental State.

(5) Describe Bodily State.

(6) Insert "the following are," or "there are no," as the case may be.

(Name) T. S. Clouston

(Medical Qualification) M.D., F.R.C.P.

(Date) 15th July 1902.

Adm: 30 July 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the Transfer

of John Crawford Dick

from Royal Edinburgh Asylum

to Crichton Royal Institution, Dumfries

and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

W. Pearce Secretary

DATED at Edinburgh, this sixteenth day of July, One thousand ~~nine~~ nine hundred and two.

Date of Sheriff's Order *[to be inserted at the Office of Board].*

10th October, 1901.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff —*of the* (2) Dumfries & Galloway, —*and his Substitutes,*— at Dumfries:—

The Petition of Percy Geall, 85 Newmarket Street, Norwich,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Ebenezer Geall, Galloway House, Carlistown,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Father, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ebenezer Geall, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Percy Geall

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this thirtieth (4) day of July, One thousand nine ~~eight~~ hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Ebenezer Geall.
2. Sex and Age,	Male. 46.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Butter. Plymouth Brethren.
5. Religious Persuasion, so far as known,	42 Addison Road. Home
6. Previous Place of Abode,	Galloway House, Carlistown.
7. Place where Found and Examined,	Aberdeen asylum.
8. Length of time Insane,	First Attack.
9. Whether First Attack,	46.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	Aberdeen asylum.
12. Duration of Existing Attack,	Unknown.
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mr. Percy Geall, 85 Newmarket St. Norwich. Son. — No —
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	No.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this thirtieth day of July, One thousand nine ~~eight~~ hundred and two.

(To be signed by the Party applying) Percy Geall

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Gilbert Aitken Welsh, being a (1) Doctor of Medicine of Edinburgh University and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) Galloway House, Garlieston, in the County of Wigtown, separately from any other Medical Practitioner, visited and personally examined (4) Ebenezer Geall, Butler, Galloway House, Garlieston, and that the said Ebenezer Geall, is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He shows by his manner depression, & exaltation. When depressed he imagines the sky the world have fallen on his shoulders, when exalted he is talkative on religious subjects says he gets revelations from God and that God has made him an interpreter of dreams &c.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From what I was talking today his own brother told me that he showed a tendency to commit suicide. He says the end of the world is at hand. He says the end of the world is at hand.

Name and Medical Designation, Gilbert A. Welsh M. D.

Place of Abode, The Crescent. Garlieston

DATED this Thirtieth day of July, One thousand eight hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Charles MacBride, being a (1) Doctor of Medicine of the University of [illegible] and being in actual practice as a (2) Physician, Galloway Garlieston, Wigtown, do hereby certify, on soul and conscience, that I have this day, at (3) Galloway House, Garlieston in the County of Wigtown, separately from any other Medical Practitioner, visited and personally examined (4) Ebenezer Geall, Butler, Galloway House, Garlieston and that the said Ebenezer Geall, is a (5) Person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Suffers from religious delusions and excitement is a leader of dreams and interprets all things belonging to God and the Prophets—

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) John Hoath, Valet says that Geall gave away all his money as he was coming to an end. Shows unsoundness of mind.

Name and Medical Designation, Charles MacBride M.B. C.M.

Place of Abode, Wigtown

DATED this 30th day of July, One thousand eight hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Gilbert Aitken Welsh
being (1) Physician,
hereby certify, on soul and conscience, that I have this day, at (2) Gallowa House Garlieston,
in the County of Wigtown,
Ebenezer Geall, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

(1) State medical qualification.
(2) State place of examination.

And I further certify that the case of the said person is one of Emergency.

Gilbert A. Welsh M.D.

Dated this Thirtieth day of July, One thousand eight hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Ebenezer Geall,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Son

Signature and Address P. Geall 85 Newmarket St Norwich

Date July 20th 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary Sheriff-Substitute of the ~~City~~ Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (3) Percy Geall, 85 Newmarket Street, Norwich,
Certificates under the hands of Gilbert Aitken Welsh,
and Charles MacRitchie,
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ebenezer Describe him, and if a Pauper, state so.
Geall, Butler, Galloway House Garlieston, (Pet'rs Fathers) and that the said
Ebenezer Geall is a (5) person of
unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ebenezer Geall as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ebenezer Geall, which accompanied the said Petition.

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated this First day of August One thousand ~~eight~~ nine hundred and two years. Two words deleted.

John Clerk

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution, Dumfries.

(6) Public, District, Parochial, or Private.

No. 8916.

Ebenezer Seall.

Adm: 31 July 1902.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum for the Order of the Sheriff is obtained.*

[FORM A]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Thomas Gibson ——— your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Gibson ——— to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) Miles Mc Innes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fifth ——— (*) day of August ———
One thousand ~~nine~~ hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Thomas Gibson
2. Sex and age,	Male — 41
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Packman
5. Religious Persuasion, so far as known,	R. Cath
6. Previous place of abode,	no fixed
7. Place where found and examined,	Burgh Police Office
8. Length of time Insane,	One day
9. Whether First Attack,	No
10. Age (if known) on First Attack,	Not known
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Crichton Royal Asylum
12. Duration of Existing Attack,	not known
13. Supposed Cause,	not known
14. Whether Subject to Epilepsy,	No
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	2nd August, 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	not known
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	Want of information

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of August One thousand ~~nine~~ hundred and two years.

(To be signed by the party applying) (Sd.) Miles Mc Innes

No. 8916.

MEDICAL CERTIFICATE, NO. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Allan

being a (1) Bachelor of Medicine & Master in Surgery

and being in actual practice as a (2) Physician & Surgeon

do hereby certify, on Soul and Conscience, that I have this day, at (3) Police Office Dumfries in the County of Dumfries separately from any other Medical practitioner, visited and personally examined (4) Thomas Gibson

and that the said Thomas Gibson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He suffers from delusions, believing himself to be Jesus Christ, is enraged & talks incoherently.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Inspector George Lipp, informed me he had suicidal tendencies; tying his bowels round his neck; passing his body down [illegible]

Name and Medical Designation, John Allan M.B. Ch.

Place of Abode, 20 Castle St. Dumfries

DATED this 2nd day of August, One ~~thousand eight hundred and~~ Nine hundred and Two

---

MEDICAL CERTIFICATE, NO. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Geo R Innes Allan Master in Surgery

being a (1) Bachelor of Medicine and Master in Surgery

and being in actual practice as a (2) Physician & surgeon

do hereby certify, on Soul and Conscience, that I have this day, at (3) Police Office Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Gibson

and that the said Thomas Gibson is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Insane appearance & manner
Has delusions Says he is Jesus Christ
Is carrying the sins of the world on his
Says he will commit suicide &c &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Geo R. Innes Allan M.B. Ch.

Place of Abode, 35 George Street Dumfries

DATED this Second day of August One thousand ~~eight~~ nine hundred and Two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, John Allan
being (1) Doctor of Medicine & Physician & Surgeon (1) State Medical qualification.
hereby certify, on Soal and Conscience, that I have this day, at (2) Police Office Dumfries (2) State place of Examination.
in the County of Dumfries, seen and personally examined "Thomas Gibson", and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

* and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries

John Allan. M.B. Cm

DATED this 2nd day of August One thousand eight hundred and 1902

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein Thomas Gibson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address, Mr Miles McGrines, 28 Queen St, Dfs.

Date, 2nd August, 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute of ~~the County of~~ Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (1) Miles McGrines, Inspector of Poor Dumfries ~~M.B.C.M.~~ (1) Insert Name and Designation. Certificates under the hands of John Allan ~~M.B.C.M.~~ and George R. Livingston, ~~M.B.C.M.~~ being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Thomas Gibson, Burgh Police Office Dumfries Pauper and that the said Thomas Gibson is a (3) Person of Unsound Mind (2) Describe him, or if a Pauper, state so. (3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind. and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Gibson as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize his Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Thomas Gibson which accompanied the said Petition.

DATED this Fifth day of August One thousand ~~eight~~ nine hundred and two years. Three words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo Campion

No. 8914

Name Thomas Gibson
(Dumfries)

Date of Admission 2nd August 1902

N.B.—*This Form shall require to be keeping of the Superintendent of the Asylum from the Order of the Sheriff is obtained.*

[FORM A]

25 and 26 *Vict., Cap.* 54, *Sec.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'JONES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that William Smith your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Smith to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) Miles Mc Jones

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fifth (*) day of August One thousand ~~eight~~ hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Smith
2. Sex and age,	Male 36
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	11 Bank Street
7. Place where found and examined,	Dumfries & Galloway Royal Infirmary
8. Length of time Insane,	a few days
9. Whether First Attack,	Not known
10. Age (if known) on First Attack,	Not known
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	No where
12. Duration of Existing Attack,	Not known
13. Supposed Cause,	Not known
14. Whether Subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	3rd August 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Isa Aitken Smith, mother residing at 11 Bank Street, Dumfries. No
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of August One thousand ~~eight~~ hundred and two years.

(To be signed by the party applying) Miles Mc Jones

MEDICAL CERTIFICATE, NO. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Peter Murray Kerr ——
being a (1) Bachelor of Medicine and Master in Surgery
of the University of Edinburgh
and being in actual practice as a (2) Licensed Practitioner
do hereby certify, on Soul and Conscience, that I have this day, at (3) Dumfries & Galloway Royal Infirmary —— in the County of Dumfries, separately from any other Medical practitioner, visited and personally examined (4) William Smith, pauper 11 Bank Street Dumfries and that the said William Smith is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane appearance and manner.
He is incoherent in speech and has
delusions of sight and hearing
He is an ~~H~~ Epileptic and has great lo
Control.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr MRCP

Place of Abode, 22 Castle Street Dumfries

DATED this second day of August One thousand ~~eight~~ hundred and nine years.

MEDICAL CERTIFICATE, NO. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, James Charles Gilchrist ——
being a (1) Bachelor of Medicine & ~~Master~~ of Surgery of the
University of Edinburgh
and being in actual practice as a (2) Physician
do hereby certify, on Soul and Conscience, that I have this day, at (3) Dumfries & Galloway Royal Infirmary, Dumfries — in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) William Smith pauper
11 Bank Street Dumfries and that
the said William Smith is a (5) person of unsound
mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His appearance & manner, Mental exaltation, delusion
of being poisoned, temporary hallucination of
seeing & hearing in both ears and sites, suspicious &
violent, dealing has not been
noted.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, James C. Gilchrist M.B.Ch.B

Place of Abode, 22 Castle Street Dumfries

DATED this second day of August One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr being (*) a Graduate in Medicine hereby certify, on Soul and Conscience, that I have this day, at (*) Dumfries and Galloway Royal Infirmary in the County of Dumfries, seen and personally examined William Smith, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum. *

And I further certify that the case of the said person is one of Emergency.

* and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries

Peter Murray Kerr

DATED this Second day of August One thousand ~~eight~~ hundred and Nine two years

(*) State Medical qualification.
(*) State place of Examination.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein William Smith to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor,

Signature and Address, Miles McInnes 28 Queen Street Dumfries

Date, 2nd August 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute of ~~the County of~~ Dumfries & Galloway, at Dumfries.

having had produced to me, with a Petition at the instance of (*) Miles McInnes, Inspector of Poor, Dumfries. Certificates under the hands of Peter Murray Kerr and James G. Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (*) William Smith, 11 Bank Street, Dumfries, (Pauper) and that the said William Smith is a (*) Person of unsound mind, and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said William Smith as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise his Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said William Smith which accompanied the said Petition.

(*) Insert Name and Designation.
(*) Describe him, and if a Pauper, state so.
(*) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this fifth day of August One thousand ~~eight~~ hundred and Nine two years. Four words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries

Geo. Campion

No. 8918

Name William Smith
(Dumfries)

Date of Admission 2nd August 1902.

[FORM A.]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway, and his Substitutes, at Dumfries

The Petition of ~~William~~ William Beattie. Ivy Cottage, Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Rebecca Beattie. Ivy Cottage. Greenbrae. Dumfries wife your Petitioner's(1) —— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Rebecca Beattie —— to the Crichton Royal Institution at Dumfries, and and to Sanction her admission into the said Institution.

(1) The degree of relationship or other capacity in which petitioner stands to Lunatic.

(To be signed by the Party applying) William Beattie

DATED this fourth —(2) day of August — One thousand nine ~~eight~~ hundred and two.

(2) The date of the Petition must be within fourteen clear days of the dates of the Medical Certificate.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Rebecca Irving or Beattie.
2. Sex and Age,	64 Female.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Housewife
5. Religious persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Liverpool.
7. Place where Found and Examined,	Ivy Cottage, Greenbrae, Dumfries
8. Length of Time Insane,	about 18 months from first attack.
9. Whether First Attack,	66.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	Crichton Royal Institution, Dumfries 1901.
12. Duration of Existing Attack,	Four months.
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	might be
16. Whether dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	——
18. Date of becoming Chargeable,	——
19. Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	niece, New Bridge Farm, N. Dfs.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	no.
	none.

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this fourth day of August — One thousand nine ~~eight~~ hundred and two

(To be signed by party applying) William Beattie

MEDICAL CERTIFICATE No. I.

I, the undersigned Alexander Dale Macdonald being a (1) Graduate of Edinburgh University and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Dry Cottage Crombie Dumfries — in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Rebecca Beattie wife of William Beattie Dry Cottage Crombie Dumfries — and that the said Rebecca Beattie — is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) has a recent and fixed expression of melancholy thinks that she has no food and has many and that she is eternally lost

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Have been previously in an asylum

Name and Medical Designation, Place of abode, A D Macdonald M.B. 18 Castle St Dumfries

DATED this 4th day of August One thousand nine hundred and two

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house, (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

MEDICAL CERTIFICATE No. II.

I, the undersigned Thomas Thomson — being a (1) Graduate in Medicine of Edinburgh University and being in actual practice as a (2) General medical practitioner hereby certify, on soul and conscience, that I have this day, at (3) Dry Cottage Crombie Dumfries — in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Rebecca Beattie wife of William Beattie Dry Cottage Crombie Dumfries — and that the said Rebecca Beattie — is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance & behaviour walking up and down continually — moaning at times crying & shouting Talks incoherently —

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Place of abode, Thomas Thomson M.B. 16 Castle St Dumfries

DATED this fourth day of August One thousand nine hundred and two years —

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned Alexander Dall MacDonald being (1) MD of Edinburgh University (1) State medical qualification. hereby certify, on soul and conscience, that I have this day, at (2) Ivy Cottage Greenbrae Dumfries (2) State place of examination. in the County of Dumfries, seen and personally examined Rebecca Beattie, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries. And I further certify that the case of the said person is one of Emergency.

A D MacDonald MD

DATED, this 4th day of August — One thousand ~~eight~~ nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Rebecca Beattie to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband

Signature and Address, William Beattie Ivy Cottage Greenbrae, Dumfries

Date, August 4th 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate Sheriff Substitute of ~~the the County of~~ Dumfries & Galloway, at Dumfries having had produced to me with a Petition at the instance of (1) William Beattie, Ivy Cottage, Greenbrae, Dumfries, (1) Insert Name & Designation Certificates under the hands of Alex: Dall MacDonald, and Thomas Ferguson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Rebecca Beattie, Ivy Cottage, Greenbrae, Dumfries, (Married Woman) and that the said Rebecca Beattie is a (3) Person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Rebecca Beattie as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Rebecca Beattie which accompanied the said Petition.

(2) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this fifth day of August One thousand ~~eight~~ nine hundred and two years. Nine words deleted

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8919

Name, Rebecca Irving of Beattie

Date of Admission, 14th August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~Not~~ Dumfries and Galloway; and his Substitutes,— at Dumfries:

The Petition of John A. McDougall, Inspector of Poor, Torthorwald:—

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Cavanagh, a tramp from Dundee, your Petitioner's (2) pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Cavanagh, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) John A. McDougall

DATED this Eighth (3) day of August, — One thousand eight hundred and two years.

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Thomas Cavanagh.
2. Sex and Age,	Male. 34 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Labourer.
5. Religious Persuasion, so far as known,	Roman Catholic.
6. Previous Place of Abode,	Royal Infirmary, Dumfries.
7. Place where Found and Examined, —	Crichton Royal Institution one day.
8. Length of time Insane,	Yes!
9. Whether First Attack,	34 years.
10. Age (if known) on First Attack,	Has just been liberated from
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	Dumfries Infirmary. one day.
12. Duration of Existing Attack,	No.
13. Supposed Cause,	No.
14. Whether subject to Epilepsy, —	Yes.
15. Whether Suicidal,	Torthorwald at present.
16. Whether Dangerous to others,	6th August, 1902.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not known.
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Sixth day of August, — One thousand eight hundred and two years.

(To be signed by the party applying) John A. McDougall

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Patrick Murray
being a (1) Graduate of Edinburgh University,
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Southern District
Asylum Dumfries, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Thomas Cavanagh Pauper
and that
the said Thomas Cavanagh is a (5) Person of unsound
mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) States that he
committed suicide Myself, - that the
Queen Victoria was his Mother. -

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Mc Dougall informed me that
he was conducting him from
at the R. Station -

Name and Medical Designation, } P. Murray M.D.

Place of Abode, Castle St. Dumfries

DATED this Seventh day of August, One thousand eight hundred and ~~fifty~~ two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University
and Surgeon
and being in actual practice as a (2) Physician and Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) The
Crichton Royal Institution, Dumfries, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Thomas Cavanagh,
a labourer and pauper -
and that
the said Thomas Cavanagh is a (5) person
of unsound mind -
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Thinks that
is to be visited by the Pope, and
other Roman Catholic dignitaries - talks
incoherently about these things. -

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, } Alex. Thomson M.D.

Place of Abode 27 Castle St., Dumfries

DATED this Seventh day of August, One thousand eight hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Rutherford, being (1) a Fellow of the Royal College of Physicians, hereby certify, on soal and conscience, that I have this day, at (2) Crichton Hosp. in the County of Dumfries, seen and personally examined Thomas Cavanagh, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum, and is in a sufficiently good state of health to be removed to the asylum at Dumfries. And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.

James Rutherford M.D.

DATED this Sixth day of August, One thousand ~~eight~~ nine hundred and two. (1902).

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Dumfries, Asylum to receive therein Thomas Cavanagh to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor. ~~James Rutherford~~

Signature and Address John A. McDougall, Torthorwald

Date 6th. August, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire Advocate Sheriff-Substitute of the (1) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) John A. McDougall, Inspector of Poor Torthorwald Certificates under the hands of Patrick Murray and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Thomas Cavanagh, Royal Infirmary, Dumfries and that the said Thomas Cavanagh, is a (4) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Cavanagh as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Cavanagh, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED this Eighth day of August, One thousand ~~eight~~ nine hundred and two years.

Geo. Campion

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(5) Public, District, Parochial, or Private.

No. 8920.

Thomas Cavanagh

(Borthonwald)

Adm: 6 August 1952.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of Dumfries & Galloway
at Kirkcudbright and his Substitutes,—

The Petition of Samuel Rigg Inspector of Poor
of the parish of Kelton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Ewing your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Ewing to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Samuel Rigg

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh (3) day of August One thousand nine hundred & two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	George Ewing
2. Sex and Age,	Male. 50
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Lodging House Castle Douglas
7. Place where Found and Examined,	Do
8. Length of time Insane,	Three days
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	✓
11. When and where previously under Examination and Treatment (4)	✓
12. Duration of Existing Attack,	Three days
13. Supposed Cause,	None known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kelton
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Samuel Ewing, Hawker Old Cumnock, Brother. None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(4) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under Examination or treatment as a Pauper, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventh day of August One thousand nine hundred & two

(*To be signed by the party applying*) Samuel Rigg

P.P.

T. & A. C.—April 1900.

MEDICAL CERTIFICATE, No. I.

(2) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(3) Physician or Surgeon, *or otherwise, as the case may be.*

(4) *Insert the street, and number of the house (if any), or other like particulars.*

(5) *Insert Designation and Residence, and if a Pauper state so.*

(6) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(7) *State the facts.*

(8) *State the information, and from whom derived.*

I, the undersigned, Robert B. Lorrane
being a (2) Graduate of Edinburgh University
and being in actual practice as a (3) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (4) Back King Street Castle Douglas in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (5) George Ewing Pauper and that the said George Ewing is a (6) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (7)
Has delusions. fancies he is poisoned and that his neighbours are plotting to take him to Govt for theft. been only dressed in a shirt and turned out. Thought clothes dog in the street was also walking but in case he left.

2. Other facts (if any) indicating Insanity communicated to me by others: (8)
Mr Swales Stewart in whose Lodging House he is says he is restless has delusions figures walking & he would go out without his clothes. is noisy at night

Name and Medical Designation, Robert B Lorrane M.B. Edin.

Place of Abode, Castle Douglas

DATED this Sixth day of August One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(2) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(3) Physician or Surgeon, *or otherwise, as the case may be.*

(4) *Insert the street and number of the house (if any), or other like particulars.*

(5) *Insert Designation and Residence, and if a Pauper state so.*

(6) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(7) *State the facts.*

(8) *State the information and from whom derived.*

I, the undersigned, Edward Bateman Hector
being a (2) a Graduate in Medicine of the University of Edinburgh
and being in actual practice as a (3) General practitioner
do hereby certify, on soul and conscience, that I have this day, at (4) Swales Stewarts Lodging House, Back King St. Castle Douglas in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (5) George Ewing, the pauper, residing in Swales Lodging House Castle Douglas and that the said George Ewing is a (6) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (7) He refuses to answer when questioned - he at times asserts that he is being poisoned - he was lying naked at the time I saw him and could give no reason for doing so.

2. Other Facts (if any) indicating Insanity communicated to me by others: (8)
Swales Stewart, Back King Street, Castle Douglas informed me that Ewing spent two hours yesterday floor trying to burn a broken clay pipe which was lying on the ground and could not be induced to return to bed - also being under the belief that some one is trying to poison him. He refuses to take food

Name and Medical Designation, Edward Bateman Hector, M.B.

Place of Abode Queen St. Castle Douglas M.B.

DATED this Sixth day of August One thousand nine hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Dated this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Asylum to receive therein to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Laurence Inverhyman Baker (1) Esq. Sheriff Substitute of the (2) Dumfries and Galloway at Kirkcudbright, having had produced to me, with a Petition at the instance of (3) Samuel Rigg Certificates under the hands of Robert B. Torrance and Edward Bateman Hector — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Ewing Pauper and that the said George Ewing is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Ewing as a patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Ewing which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated [at Kirkcudbright] this Seventh day of August One thousand nine hundred and two

To the Superintendent of the (7) Southern Counties Asylum of Dumfries

(7) Public, District, Parochial, or Private.

[*Signature*] Laurence I. Baker

No. 8981.
George Ewing.
(Kelton)
Adm: 4 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff - *of the* (2) Dumfries & Galloway; *and his Substitutes,*— at Dumfries:

The Petition of Isabella Akitt. Kirkcaldy. Kirkgate, Kirkcaldy:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret McKelvie Akitt ——

(3) State degree of relationship or other ground in which Petitioner stands to Lunatic.

your Petitioner's (3) Daughter, ——

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret McKelvie Akitt, — to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Isabella Akitt

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (4) day of August, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret McKelvie Akitt.
2. Sex and Age,	Female. 42 years of age.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	No occupation. Formerly of 14 St. Enoch Square Glasgow.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Ayrshire & Dumfries.
7. Place where Found and Examined,	Crichton Royal Institution.
8. Length of time Insane,	From 9th June 1902
9. Whether First Attack,	32 years of age.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	East Lancefield Glasgow. Quite recovered at the end of 6 months.
12. Duration of Existing Attack,	Recently Favourable.
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Isabella Akitt. c/o. H. Cummings Esq. Kirkgate Kirkcaldy. Mother. No insanity in family.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has been previously in an Asylum, state date of latest admission. If under treatment, state date.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Ninth day of August — One thousand nine hundred and two years -

(To be signed by the party applying) Isabella Akitt

P. p.

A. & A. C.—March 1902.

No. 8981 George Burnside

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow, University and Surgeon
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 27 Castle Street, Dumfries
in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Margaret McKelvie Akitt Hunter, Shelmorlie, Ayrshire and that the said Margaret McKelvie Akitt, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) does not engage in conversation; pays no attention to what is said to her; but talks on in an utterly incoherent and inarticulate manner.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.
Place of Abode, 27 Castle St. Dumfries

DATED this Eighth day of August, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Peter Murray Kerr,
being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and Licentiate of the Royal Colleges of Physicians and Surgeons of Edinburgh
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution,
in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Margaret McKelvie Akitt, Spinster, Shelmorlie Ayrshire and that the said Margaret McKelvie Akitt is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her insane appearance and manner.
She is incoherent in speech.
She lies in bed with all the bedclothes in a twisted manner, shouting loudly, & then lies into bed for Hamilton.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M
Place of Abode, 27 Castle Street Dumfr
DATED this ninth day of August, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff)

I, the undersigned Alexander Thomson
being (1) a Doctor of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) 27 Castle St.
in the County of Dumfries seen and personally examined
Margaret McKelvie Akitt, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Alex. Thomson, M.D.

DATED this Eighth day of August One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Margaret McKelvie Akitt, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother.

Signature and Address Isabella Akitt Birkgate Kirkcaldy

Date 8th August, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Esquire Honorary Sheriff Substitute, of (4) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (5) Isabella Akitt, Birkgate, Kirkcaldy Certificates under the hands of Alexander Thomson and Peter Murray Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Margaret McKelvie Akitt, Spinster, Shelwalls, Ayrshire and that the said Margaret McKelvie Akitt, is a (7) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret McKelvie Akitt as a Patient into the (8) Public Asylum of Crichton Royal Institution and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret McKelvie Akitt, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(6) Describe him, and if a Pauper, state the fact.
(7) Lunatic, or as Insane Person, or as Idiot, or a Person of unsound mind.
(8) Public, District, Parochial, or Private.

DATED [at Dumfries] this eleventh day of August One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (9) Pubic Asylum of Crichton Royal Institution.

(9) Public, District, Parochial, or Private.

[Signature] Inr Clerk

No. 8922.

Margaret Mackelvie Akitt

Adm. 8 August 1902.

Dated 12.5 a.m. 9th August

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes,*— at Dumfries:

The Petition of Joseph Martin, 203 Albert Bridge Road, Belfast:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Andrew Martin, your Petitioner's (3) Father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Andrew Martin to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Joseph Martin

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (4) day of August, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Andrew Martin.
2. Sex and Age,	54 years. Male.
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous Occupation (if any),	Merchant.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Rosendale, Fortwilliam Park, Belfast.
7. Place where Found and Examined,	Rosendale, Fortwilliam Park, Belfast.
8. Length of time Insane,	Two weeks.
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	Never.
12. Duration of Existing Attack,	Two weeks.
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Joseph Martin, 203 Albert Bridge Road, Belfast (Son).
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state name of latest Asylum to which admitted. If previously under Medical or treatment elsewhere, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Ninth day of August, — One thousand nine hundred and two years.

(To be signed by the party applying) Joseph Martin

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, J Patrick, ——— being a (1) MB. Bath. R.U.I. ——— and being in actual practice as a (2) Physician Fortwilliam Park, Belfast ——— in the County Antrim, ——— separately from any other Medical Practitioner visited and personally examined (4) Andrew Martin, ——— and the said Andrew Martin, ——— is a a insane person, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) is quiet, dull, nervous, restless, depressed & delusional. states his friends are dead, that he is going to be arrested.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his son states that he states people around him are dead & that he is going to be robbed

Name and Medical Designation, J Patrick MB

Place of Abode, Belfast.

DATED this third day of August, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Robert Hall, ——— being a (1) Physician & Surgeon, ——— and being in actual practice as a (2) Physician, ——— do hereby certify, on soul and conscience, that I have this day, at (3) Fortwilliam Park Belfast, ——— in the County Antrim, ——— separately from any other Medical Practitioner visited and personally examined (4) Andrew Martin ——— and the said Andrew Martin, ——— is a a insane person, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He fancies a noise he hears noises, robbers in the house removing furniture. says he is afraid of the household starved as there is no food in the house, and his friends are dying or dead.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That he constantly wanders about the house wringing his hands crying my God. what shall I do. Refusing to take food. or to go to bed

Name and Medical Designation, Robert Hall L.R.C.S.I.

Place of Abode, 1 Royal Terrace Belfast

DATED this 1st day of August, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Rutherford, being (1) a doctor of Medicin of the University of Edinburgh, medical qualification hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal (2) State place of examination. in the County of Dumfries — Interview at my house personally examined Andrew Martin of Rosendale, Belfast, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (2) Dumfries.

(2) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

James Rutherford MD

DATED this Ninth day of August — One thousand nine hundred and two —

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Andrew Martin, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Son.

Signature and Address Joseph Martin 203 Albert Bridge Road Belfast.

Date 9th August, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary Sheriff-Substitute of (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Joseph Martin, 203 Albert Bridge Road, Belfast, Certificates under the hands of Patrick, and Robert Hall, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Andrew Martin, Rosendale, Fortwilliam Park, Belfast, and that the said Andrew Martin, is a an insane person, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Andrew Martin as a patient into the (4) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Andrew Martin, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(2) Insert Name and Designation.

(3) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(4) Public, District, Parochial, or Private.

DATED [at Dumfries,] this eleventh day of August One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (4) Public *Asylum of* Crichton Royal Institution.

(4) Public, District, Parochial, or Private.

[Signature] Jno Clerk

No. 8923.

Andreas Khartin.

Adm: 9 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (1) County of Dumfries. *and to all his Substitutes,—*

The Petition of Wm. Mc. Lean Inspector of Poor, Parish of Canonbie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Fowden

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Fowden to the Crichton Royal Asylum and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Wm. Mc. Lean Inspector

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 12th (3) day of August, One thousand nine hundred & Two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Agnes Fowden.
2. Sex and Age,	64 Female.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	House keeper
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Barkland Canonbie.
7. Place where Found and Examined,	Barkland.
8. Length of time Insane,	About one year.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (3)	
12. Duration of Existing Attack,	four months
13. Supposed Cause,	Hereditary.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Canonbie.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Margaret Fowden Barkland Canonbie, Sister; Yes.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of August, One thousand nine hundred & Two.

(To be signed by the party applying) Wm. Mc. Lean Insp.

A. A. C.—Jan. 1900. P

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Paul MacDonald
being a (1) Graduate of Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) 56 High St
Dumfries
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Nancy Rowden, Pauper Bankend, Caerlaverock and that the said Nancy Rowden is a (5) Person of unsound Mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) As I am informed by Mr Robertson Mrs Rowden is a Person on the Poor Roll that she is very violent & refuses to take food or medicine.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Has been Referred for a long time both Body and Mind to be in Asylums.

Name and Medical Designation, A. P. MacDonald

Place of Abode, 18 Castle St Dumfries

DATED this 12th day of August, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Patrick Kinnear
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 56 High St
Dumfries
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes London Pauper Barbadbankend and that the said Agnes London is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Melancholia. Imagined her food is poisoned. that people steal her things.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Much the same as above.

Name and Medical Designation, P. Kinnear M.D.

Place of Abode, 18 Castle St Dumfries

DATED this 12th day of August, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Dall MacDonald being (1) a Graduate of Edinburgh Univ. hereby certify, on soul and conscience, that I have this day, at (2) 56 Nyd St. in the County of Dumfries, — seen and personally examined Agnes Lowden, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries. —

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

A. D. MacDonald M.D.

DATED this 12th day of August, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Agnes Lowden to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor.

Signature and Address Wm. Mc Dowall Clerk

Date 12/8/02.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Esquire Honorary Sheriff Substitute, of the (2) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) Thomas Mc. Dowall, Inspector of Poor, Carlaverock, Certificates under the hands of Alexander Dall Mc. Donald, and Patrick Murray, — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Lowden Bankend, Caerlaverock Mains, and that the said Agnes Lowden, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Lowden, — as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Lowden, — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fifteenth day of August, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] John Clerk

No. 8934.

Agnes Loudon.

Adm. 18 August 1902.

(Carlaverock)

H. W. B.

[FORM A]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries & Galloway, *and his Substitutes,* at Dumfries.

The Petition of Herbert Walter Browne, 3 Brunswick Terrace, Penrith,

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Emmeline Dora Browne, your Petitioner's (1) Sister, is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Emmeline Dora Browne, to the Crichton Royal Institution at Dumfries, and to sanction her admission into the said Institution.

(1) State Degree of Relationship, or other capacity in which Petitioner stands to Lunatic.

H. W. Browne

(To be signed by the Party applying).....

(2) The date of the Petition must be within four-teen days following the date of the Medical Certificates.

DATED this thirteenth (2) day of August, One thousand ~~eight hundred~~ and nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Emmeline Dora Browne.
2. Sex and age,	female. 46 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Gentlewoman
5. Religious Persuasion, so far as known,	Protestant Church of England.
6. Previous place of abode,	3 Brunswick Terrace, Penrith.
7. Place where found and examined,	3 Brunswick Terrace, Penrith.
8. Length of time Insane,	one week.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	25.
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Has she previously been at Garlands at Dunstan Lodge, and at the Crichton Royal Institution 1896?
12. Duration of Existing Attack,	a week.
13. Supposed Cause,	Nothing stated.
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship, (if known), and whether any Member of her Family known to be or to have been Insane,	Herbert Walter Browne, 3 Brunswick Terrace, Penrith, Cumberland. (Brother).
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	no

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this thirteenth day of August — One thousand ~~eight hundred~~ nine hundred and two.

H. W. Browne

(To be signed by the Party applying).....

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Joseph Edward Bowyer
being a (1) Bachelor of Medicine & the University of Edinburgh
and being in actual practice as a (2) Physician
do hereby certify, on Soul and Conscience, that I have this day, at (3) No 3 Brunswick Terrace Penrith, in the County of Cumberland, separately from any other Medical Practitioner, visited and personally examined (4) Emmeline Dora Browne, of No 3 Brunswick Terrace Penrith, and that the said Emmeline Dora Browne is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her appearance is that of a person of unsound mind. She is untidy in her dress, restless in her manner, excitedly drums the piano, and is incoherent in speech.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Herbert Walker Browne states that she was about in the garden unsufficiently dressed, with her hair hanging down her back.

Name and Medical Designation, J. Edward Bowyer M.B.

Place of Abode, Grasmere Hall Penrith

DATED this thirteenth day of August — One thousand ~~eight hundred and~~ nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, James Altham,
being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh
and being in actual practice as a (2) physician
do hereby certify, on Soul and Conscience, that I have this day, at (3) No 3 Brunswick Terrace, Penrith, in the County of Cumberland, separately from any other Medical Practitioner, visited and personally examined (4) Emmeline Dora Browne, and that the said Emmeline Dora Browne is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks continuously and incoherently on many subjects, is excited in his manner, without any obvious cause, his behaviour is entirely different from the usual demeanour.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) John Edgar Browne tells me that though he went to bed at Grasmere Rectory last night he was missed during the night. He was walking bare-footed in the snow, and had to be carried in. He was violent, singing hymns and talking incoherently.

Name and Medical Designation, James Altham
M.B. Durh. Late Physician Penrith Cumberland

Place of Abode,

DATED this twelfth day of August One thousand ~~eight hundred and~~ nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Rutherford, being (1) a Doctor of Medicine of the University of Edinburgh, medical qualification hereby certify, on Soul and Conscience, that I have this day, at (2) Crichton Royal Institution, Dumfries, in the County of Dumfries, seen and personally examined Emmeline Dora Browne, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum.*

(2) State place of examination.

And I further certify that the case of the said Person is one of Emergency.

* And is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

James Rutherford M.D.

DATED this thirteenth day of August, One thousand ~~eight~~ nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Emmeline Dora Browne, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address, H W Brown

Date, 13th August, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary Sheriff-Substitute of ~~the County~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Herbert Walker Browne, 3 Brunswick Terrace, Penrith, Certificates under the hands of Joseph Edward Bowes and James Altham, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Emmeline Dora Browne, 3 Brunswick Terrace, Penrith, (Petitioner's Sister) and that the said Emmeline Dora Browne, is a (3) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Emmeline Dora Browne, as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Emmeline Dora Browne, which accompanied the said Petition.

(1) Insert Name and Designation.

(2) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this fourteenth day of August, One thousand ~~eight~~ nine hundred and two years. Four words deleted. J. Clerk

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8925.

Name, Emmeline Dora Browne.

Date of Admission, 13th August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of ~~the~~ (2) Dumfries and Galloway — and his Substitutes, — at Dumfries.

The Petition of Mrs Juliana S. MacEwan, residing at Lochgilphead Argyleshire — humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Hugh Campbell MacEwan your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Hugh Campbell MacEwan to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Juliana S. MacEwan

DATED this Twenty second (4) day of August — One thousand nine hundred and two years.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Hugh Campbell MacEwan
2. Sex and Age,	Male 23 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Lawyers clerk
5. Religious Persuasion, so far as known,	Episcopalian
6. Previous Place of Abode,	Union Bank House Lochgilphead
7. Place where Found and Examined,	
8. Length of time Insane,	probably two years
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	21 years
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	two years
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Not so far as physical safety is concerned
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Archibald MacEwan Union Lochgilphead father.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an asylum, state date of latest approximate to. If previously under treatment or treatment not.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 21st day of August — One thousand nine hundred and two years — *(To be signed by the party applying)* Juliana S. MacEwan P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Murdoch Brown being a (1) Doctor of medicine Edinburgh University and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) the Windsor Hotel James Street Edinburgh in the County of Midlothian separately from any other Medical Practitioner visited and personally examined (4) Hugh Campbell MacEwan Son of and residentwith his Father a Banker in Lochgilphead and the said Hugh Campbell MacEwan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

The whole of his conduct at present, without ostensible means he is at, his expenses in the best hotels, issuing cheques for large sums of money in payment of his hotel bills without having any b account to meet such cheques. Issuing purposeless and lying telegra

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His Father informs me that this morning Mr Hugh (MacEwan told the people in the Hotel that his mother was dead & that he was on his way to the funeral, which is a mere delusion.

Name and Medical Designation, J Murdoch Brown M

Place of Abode, 9 Walker Street Edinburgh

DATED this Thirtieth day of August One thousan nine hundred and two years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Peter Murray Kerr being a (1) Bachelor of Medicine and Master in Surg of the University of Edinburgh and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries separately from any other Medical Practitioner visited and personally examined (4) Hugh Campbell MacEwan Lochgilphead and the said Hugh Campbell MacEwan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

He wanders about from town to town without any purpose. He issues cheques for sums of money although he has no b account. He has great difficulty in letting truth frame great lack of control. Tends lying tel

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Archibald Cannell. Mrs Lochgilphead inf me that the patient whole conduct showe complete want of moral sense.

Name and Medical Designation, Peter Murray Kerr M

Place of Abode, 20 Castle Street Dumfr

DATED this Twenty first day of August One thousan nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Murdoch Brown
being (1) a Doctor of Medicin Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Lochgilphead
in the County of Argyll, seen and personally examined
Hugh Campbell MacEwan, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) at Dumfries (The Crichton Royal Institution)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

James Murdoch Brown M.D

DATED this thirteenth day of August One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Hugh Campbell MacEwan to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Mother

Signature and Address Juliana S MacEwan
Date 21st. August. 1902 Lochgilphead

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (1) Sheriff-Substitute of ~~the~~ (2) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) Mrs Juliana S MacEwan, Lochgilphead, Argyllshire, Certificates under the hands of James Murdoch Brown and Peter Murray Leslie, being two Medical Persons duly qualified in terms of an Act intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Hugh Campbell MacEwan, Union Bank House, Lochgilphead, Argyll and that the said Hugh Campbell MacEwan, is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Hugh Campbell MacEwan as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize you to Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Hugh Campbell MacEwan which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this twenty-second day of August One thousand nine hundred and two years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution
Dumfries.

[Signature] John Clerk

(7) Public, District, Parochial, or Private.

No. 8926.

Hugh Campbell MacEwan

Adm: 21 August 1902.

S.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Ayr *and his Substitutes,—*

The Petition of James Bolton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Moran your Petitioner's (3) Grand-daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Moran to the Crichton Institution, Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) James Bolton

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 21 (4) day of August One thousand nine hundred and two years

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Moran
2. Sex and Age,	Female 20
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Spinster
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	98 New Road, Ayr
7. Place where Found and Examined,	98 New Road, Ayr
8. Length of time Insane,	Six Days
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	20
11. When and where previously under Examination and Treatment (5)	never before under treatment
12. Duration of Existing Attack,	Six Days
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	-
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Bolton, Grandfather 98 New Road, Ayr No
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	-

(5) If patient has previously in an asylum, state name of latest asylum or hospital to which he was sent. If previously under treatment or treatment elsewhere state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 21st day of August One thousand nine hundred and two years

(To be signed by the party applying) James Bolton

C. & A. C.—Jan. 1900. P p

No. 2286

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, William Moore being a (1) M.B., C.M. Glasgow

and being in actual practice as a (2) general practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 98 New Road Ayr in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Margaret Moran, 98 New Road, Ayr and that the said Margaret Moran is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is paranoiac-dejected. Talks quite incoherently & cannot answer questions about herself. Continues talking, screaming, shouting or singing

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Grandmother Mrs Bolton says she has been in this condition for six days & that she practically sleepless

Name and Medical Designation, Will. Moore M.B.,

Place of Abode, 1 Eglinton Terrace, Ayr

DATED this 21 day of August One thousand nine hundred and two years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, John Riddell being a (1) Mem. Fac. Phys. & Surg. Glasgow

and being in actual practice as a (2) general practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 98 New Road Ayr in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Margaret Moran, 98 New Road Ayr and that the said Margaret Moran is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She talks in a most excited and incoherent manner, and can give no sane account of herself, and refuses to answer questions.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her Grandmother, Mrs Bolton, says She does not sleep, and at times refuses all food. Talks nothing but nonsense.

Name and Medical Designation, John Riddell L.F.P.S. & L.F.P.S. Glas.

Place of Abode 6 Wellington Square Ayr.

DATED this 21st day of August One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David James Mackenzie Esq (1) Advocate Sheriff Substitute
of the (2) County of Ayr
having had produced to me, with a Petition at the instance of (3) James Bolton
98 New Road, Ayr.
Certificates under the hands of William Moore M.B. C.M.
and John Riddell, L.F.P.S. being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Margaret Moran, 98 New Road, Ayr and that the said
Margaret Moran is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Moran as a patient into the ~~Asylum of~~ Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Moran which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Ayr] this Twenty first day of August
One thousand nine hundred and two years.

To the Superintendent of the (7)
~~Asylum of~~
Crichton Institution
Dumfries [Signature] David J. Mackenzie

(7) Public, District, Parochial, or Private.

No. 8924

Margaret Horan

Adm. 21 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of the ~~County~~ Dumfries Talladay and his Substitutes, — at Dumfries

The Petition of James Richardson Inspector of Poor Middlebie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Moffat, Broadleabottage, Middlebie

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Annie Moffat — to the Brighton Royal Asylum — and to sanction her admission into the said Asylum.

(To be signed by the Party applying) James Richardson

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty first (3) day of August — One thousand ~~nine~~ hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Annie Moffat
2. Sex and Age,	Female age 16 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Housekeeper
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Broadlea
7. Place where Found and Examined,	Broadlea
8. Length of time Insane,	Three weeks
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	16 years
11. When and where previously under Examination and Treatment (5),	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	Mental Disorder
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	—
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Middlebie
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Moffatt Broadlea. Her father. Her mother dead 8 years ago of the same trouble
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty first day of August — One thousand ~~eight~~ nine hundred and two

(To be signed by the party applying) James Richardson.
Inspector of Poor P.P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, James Gilroy
being a (1) Bachelor of Medicine & Master of Surgery of Glasgow Univ
and a Licentiate of the Faculty of Physicians & Surgeons of Glas
and being in actual practice as a (2) physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Broad Cott
Dumfries in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Annie Moffat Pauper
and that
the said Annie Moffat is a (5) person of unso
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
She is silent & preoccupied does not respond to
addressed Stolidly remaining silent Pupils widely
Fibrillary Twitchings of Tongue indicative of mental disor

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
That she has been taking fits frequently testified to by her
William Moffat That she takes turns of violence throughout
Immoveable things saying she was insane testified to by Mr
Name and Medical Designation, James Gilroy M.B.C.M
Place of Abode, Waterbeck Tedderech
DATED this nineteenth day of August One thousand
hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, J. Bell
being a (1) Bachelor of Medicine and master of Sur
of Edinburgh University & Physician & Surgeon.
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3)
Broadlea Cottage in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Annie Moffat, Pauper
Broadlea Cottage
and that
the said Annie Moffat is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
She looks listless & stupid. Can not an
swer the simplest question coherently.
Her memory seems impaired.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Peck (her aunt) informs me that she
takes sudden violent fits, and roved a
the Children, Restless during the night, & had
quite a few fits for the increase in her night fits. She has been the subject of such
fits for the last six months
Name and Medical Designation, J. Bell M.B., C.
Place of Abode 10 Charlotte
DATED this 20th day of August One thousand eight
hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Gilroy
being (1) M.B. C.M. L.R.C.S.
hereby certify, on soul and conscience, that I have this day, at (2) Moniaive
in the County of Dumfries, seen and personally examined
Annie Moffat, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

James Gilroy M.B. C.M.

DATED this 19th day of Aug One thousand ~~eight~~ Nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum
Asylum to receive therein Annie Moffat
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Pauper

Signature and Address James Richardson Inspector of Poor

Date 21st Augt 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (1) Sheriff Substitute
of (2) Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (3) James Richardson, Inspector of Poor, Middlebie, Certificates under the hands of James Gilroy, and J. S. Bell, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Annie Moffat, Bandalgottage, Middlebie (a pauper) and that the said Annie Moffat is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Annie Moffat as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Annie Moffat, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twenty-second day of August, One thousand ~~eight hundred and~~ nine hundred and two years.

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution

[Signature] Dumfries. Ex Clerk

(7) Public, District, Parochial, or Private.

No. 8928.

Annie Moffat.

(Middlebie).

Adm. 21 August 1882.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of Roxburgh and Selkirk~~ of the (2) Stewartry of Dumfries & Galloway *and his Substitutes,*—at Dumfries

The Petition of Jane Muir 36 Margaret Street. Greenock.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Muir, 36 Margaret Street Greenock your Petitioner's (3) brother

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Muir to the Crichton Royal asylum Dumfries and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Jane Muir

(4) The date of the Petition must be within fourteen clear days ~~eight~~ following the dates of the Medical Certificates.

DATED this 25th — (4) day of August — One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Robert Muir
2. Sex and Age,	Male, 43 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Copper & Brassfounder
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	36 Margaret St Greenock
7. Place where Found and Examined,	Same place.
8. Length of time Insane,	More or less for two or three years
9. Whether First Attack,	43 years First attack
10. Age (if known) on First Attack,	43 years
11. When and where previously under Examination and Treatment (5)	Never previously under examination or treatment.
12. Duration of Existing Attack,	See No 8
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Sister Jane Muir, 36 Margaret St Greenock None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously been under Examination, state date of latest Examination or approximate date. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 25th day of August — One thousand nine hundred and two

(*To be signed by the party applying*) Jane Muir

T. & A. C.—Jany. 1898. P p.

No. 8988.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, David Lees
being a (1) Licentiate of the Royal College of Physicians of Edin
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 36 Margaret
Greenock in the County of
Renfrew separately from any other Medical Practitioner,
visited and personally examined (4) Robert Muir 36 Margaret
Greenock and that
the said Robert Muir is a (5) Person of unsou
and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
He informs me that he is constantly molested & harmed by Priests of Roman Catholics and has visited the Home Secretary in London to obtain redress but without any effect

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, David Lees LRCPE
Place of Abode, Greenock
DATED this 23rd day of August One thousand ~~eight~~ nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Marcus Ledder,
being a (1) Licentiate of the Royal College of Physicians of Edinburgh. Physician
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3) 36 Margaret Street Greenock in the County of
Renfrew separately from any other Medical Practitioner,
visited and personally examined (4) Robert Muir
and that
the said Robert Muir is a (5) Person of unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has denoted to me His being persecuted by the Priests and others of the Roman Catholic persuasion and has indicated that if the authorities and others were aware of its extent they would be misled to serious extent caused thereby.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
That he has endeavoured to place his grievances before the authorities in person & personally solicited assistance to overthrow the influence the Roman catholic persuasion has over him.

Name and Medical Designation, Marcus Ledder LR
Place of Abode 12 Union Street Greenock
DATED this twenty fourth day of August, One thousand ~~eight~~ nine hundred and Two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, David Lees being (1) a Graduate of the Royal College of Physicians Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) 36 Margaret St Greenock in the County of Renfrew, seen and personally examined Robert Muir, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Asylum Dumfries

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

David Lees L.R.C.P.E.

DATED this 24th day of August One thousand ~~eight~~ nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum Dumfries Asylum to receive therein Robert Muir to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Sister 36 Margaret St Greenock

Signature and Address Jane Muir

Date 25th August 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, — (1) Sheriff-Substitute of the (2) ~~Stewartry~~ of Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (3) Jane Muir 36 Margaret Street, Greenock Certificates under the hands of David Lees, and Marcus Calder being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert Muir, 36 Margaret Street, Greenock. (Petitioner's Brother.) and that the said Robert Muir is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Muir as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Muir which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty-sixth day of August One thousand ~~eight hundred and~~ nine hundred and two years. Four words deleted.

To the Superintendent of the (6) Public *Asylum of* Crichton Royal Institution.

[Signature] Dumfries. 26. Campion

(6) Public, District, Parochial, or Private.

No. 8429

Robert Amis.

Adm: 25 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of Dumfries & Galloway~~, *and his Substitutes, at Dumfries.*

The Petition of Elizabeth Forfar, Townfoot of Auchencairn, Kirkbankhoe, Dumfriesshire,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Sharpe or Forfar, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Mother, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Sharpe or Forfar — to the Crichton Royal Institution, — and to sanction Her admission into the said Asylum.

(*To be signed by the Party applying*) Elizabeth Forfar.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty seventh (4) day of August, — One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Sharpe or Forfar.
2. Sex and Age,	Female - age 65.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Farmer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Townfoot of Auchencairn, Kirkbankhoe.
7. Place where Found and Examined,	Townfoot of Auchencairn.
8. Length of time Insane,	about four weeks
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	Between 45 and 50.
11. When and where previously under Examination and Treatment (5)	Crichton Institution, Dumfries, about 5 or 6 years ago.
12. Duration of Existing Attack,	About four weeks.
13. Supposed Cause,	Not known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Inclined that way.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Forfar, Townfoot of Auchencairn, Kirkmabreck. Daughter. None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under observation or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty seventh day of August, — One thousand nine hundred and two.

(*To be signed by the party applying*) Elizabeth Forfar.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Peter Murray Kerr, being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh, and being in actual practice as a (2) General Practitioner, do hereby certify, on soul and conscience, that I have this day, at (3) Comfort Cottage, Ambleraain, Kilmahoe in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Sharpe a Forfar woman. Comfort Cottage Ambleraain Kilmahoe and that the said Margaret Sharpe a Forfar, is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance and manner. She believes that she has no clothes & just. She is restless and excited and occasionally she jumps out of bed.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her daughter Elizabeth Forfar informs me that she is quite unmanageable and has threatened several times to destroy herself.

Name and Medical Designation, Peter Murray Kerr MB

Place of Abode, 20 Castle Street Dumfries

DATED this twenty-ninth day of August, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Craig R. Livingston, being a (1) Bachelor of Medicine, Master in Surgery of Edinburgh University, and being in actual practice as a (2) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) 6 Richmond Royal Institution, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Sharpe a Forfar, Richmond Royal Institution and that the said Margaret Sharpe of Forfar is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Her insane appearance.
Her excited restless manner.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Craig R. Livingston

Place of Abode 35 Craig Street Dumfries

DATED this twenty-ninth day of August, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Murray Kerr
being (1) Graduate in Medicine,
hereby certify, on soul and conscience, that I have this day, at (2) Townfoot Auchencairn,
in the County of Dumfries, seen and personally examined
Margaret Sharpe or Forfar,
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries;

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Peter Murray Kerr.

DATED this Twenty-seventh day of August, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution
Asylum to receive therein Margaret Sharpe or Forfar
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Daughter

Signature and Address Elizabeth Forfar.
Townfoot Auchencairn, Kirkmahoe.

Date 27th August 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Esquire (1) Honorary Sheriff-Substitute,
of the Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) Elizabeth Forfar,
Townfoot Auchencairn, Kirkmahoe, Dumfries,
Certificates under the hands of Peter Murray Kerr,
and George R. Livingston,
being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Margaret Sharpe or Forfar, Townfoot Auchencairn, Kirkmahoe, Dumfries, and that the said Mrs Margaret Sharpe or Forfar, is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Margaret Sharpe or Forfar as a Patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Margaret Sharpe or Forfar, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries.] this Twenty-ninth day of August.
One thousand nine hundred and two years.

To the Superintendent of the (6) Public
Asylum of Crichton Royal Institution
Dumfries.

[Signature] John Clerk

(6) Public, District, Parochial, or Private.

No. 8930.
Margaret Sharp of Forfar.
Adm: 24 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes,* — at Dumfries

The Petition of James Paterson

Redlands. Ashgrove Street. Ayr.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie P. Paterson daughter your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jessie P. Paterson to the Crichton Institution Dumfries. and to sanction the admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) James Paterson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of August — One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jessie Paterson Paterson
2. Sex and Age,	Female put down as her 41st year
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Was My Housekeeper until for the last four years been Assisting as Masseuse — W P — or now the W H
5. Religious Persuasion, so far as known,	Nil
6. Previous Place of Abode,	Residence of Castle Hill Road Ayr
7. Place where Found and Examined,	Redlands Ashgrove Street Ayr
8. Length of time Insane,	First Impression of ill about 11th July Gradually getting worse
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	No Previous attacks
11. When and where previously under Examination and Treatment (5)	Never —
12. Duration of Existing Attack,	16 days
13. Supposed Cause,	Know of nothing to Cause it - but overwork
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Except in talk in this first attack
16. Whether Dangerous to others,	gets a little outrageous at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Paterson Redlands Ashgrove Ayr Father — A Sister of her Mothers was under treatment Several times - but is now quite well
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has been previously in an Asylum, state name and date of latest Admission or Approval thereto. If previously under Treatment or Examination or Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th — day of August — One thousand nine hundred and two

(To be signed by the party applying) James Paterson

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Rallerton
being a (1) M.D. Glasgow University
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Redland, Ashgrove St. Ayr
in the County of Ayr. separately from any other Medical Practitioner, visited and personally examined (4) Jessie P. Paterson Redlands. Ashgrove St. Ayr and that the said Jessie P. Paterson is a (5) Person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Talks very incoherently. Thinks "she is "in the family way" & that she is being persecuted & that persons are stealing her effects. Very restless at times.

2 Other facts (if any) indicating Insanity communicated to me by others: (7)
Her father states that she talks about killing herself & that she attempted to run away.

Name and Medical Designation, Rallerton M.D.

Place of Abode, Netherton, Ayr

DATED this 27th day of August One thousand nine hundred & two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jessie Paterson Paterson, Masseuse, Redlands, Ashgrove St, Ayr and that the said Jessie Paterson Paterson is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She is very forgetful, and can hardly tell where she comes from or what she has been doing: talks very incoherently about her condition.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode 27 Castle St, Dumfries

DATED this Twenty-ninth day of August One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, being (1) M. D. Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Redlands Ayr in the County of ——, seen and personally examined Jessie P. Paterson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

R. A. Motton. M.D.

DATED this 28th day of August One thousand nine hundred & two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Dumfries. Asylum to receive therein Jessie Paterson Paterson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address James Paterson

Date 28 August 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Clerk, Honorary (1) Sheriff-Substitute of (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) James Paterson Redlands, Ashgrove Street, Ayr, Certificates under the hands of R. A. Motton, and Alexander Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jessie Paterson Paterson, Redlands, Ashgrove Street, Ayr, (Father's daughter) and that the said Jessie Paterson Paterson is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jessie Paterson Paterson as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jessie Paterson Paterson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Thirtieth day of August, One thousand nine hundred and two years.

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries.

[Signature] John Clerk

(6) Public, District, Parochial, or Private.

No. 8931

Jessie Paterson Paterson

Adm: 28 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of Dumfries & Galloway and his Substitutes.

The Petition of John Jardine Dunlop Inspector of Poor Parish of Mochrum, Neighbouring

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Jane McGrindle wife of Charles Templeton Pauper.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Jane McGrindle, wife of Charles Templeton to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) John J Dunlop

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty fifth (4) day of August. One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jane McGrindle or Templeton
2. Sex and Age,	Female 56 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Innkeeper.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	"
7. Place where Found and Examined,	Elrig Village
8. Length of time Insane,	Attack has been developing for nearly a year.
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	55 years
11. When and where previously under Examination and Treatment (5)	"
12. Duration of Existing Attack,	"
13. Supposed Cause,	Parietal hemiplegia
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Mochrum Parish (meantime)
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Julia Muir Elrig Village a married daughter.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under Examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 25th day of August. One thousand nine hundred and two years.

(*To be signed by the party applying*) John J Dunlop

P. P.

T. & A. C.—April 1900.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Mc Donald Selby being a (1) Bachelor of Medicine and Master of Surgery of Edinburgh University and being in actual practice as a (2) General Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) this Village Wigtown in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Mrs Andrew Templeton, residing Jane Mc Cridle, Pauper, this Village. and that the said Mrs Andrew Templeton is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)

1. She is always melancholy and weeps when any one speaks to her
2. She states she is object poverty and cannot ea in case her family starve

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her daughter Robina Higgins informed me that she has some reason which she will not tell me for many years & and also a knife and always determined to do away with them. Her Daughter Mrs Jamieson told me that at times she would not eat anything

Name and Medical Designation, W. Mc D Selby M.B. Ch.B.

Place of Abode, Wigtown

DATED this 24th day of August One thousand nine hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, James Fleming Smith being a (1) Bachelor of Medicine & Master of Surgery of Edinburgh University and being in actual practice as a (2) General Medical Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) this Village Wigtown in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Mrs Jane McCandlish Templeton Pauper and that the said Mrs Jane McCandlish Templeton is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)

She tells me that she is in utter poverty and unable to procure food & cannot pay her rent & clothes which is not the fact:

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Her daughter Mrs Julia Annie Higgins informs me that she refuses to take food on account of supposed poverty & thinks she was dead

Name and Medical Designation, James F. Smith M.B. Edin M.C.

Place of Abode Wigtown

DATED this 25th day of August One thousand nine hundred and two

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of seen and personally examined
, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ____

Signature and Address ____

Date ____

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Mackie (1) Sheriff Substitute
of the (2) Sheriffdom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) John James Dudgeon Inspector of Poor, Parish of Lochmaben Wigtownshire
Certificates under the hands of William McDonald Selby M.D. Gn. Portrack and James Fleming Smith M.B.C.M. Whithorn being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) and that the said Mrs Jane McCrindle or Templeton pauper, Mrs Jane McCrindle or Templeton is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Jane McCrindle or Templeton as a patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Jane McCrindle or Templeton which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Wigtown] this twenty eighth day of August One thousand nine hundred and two years.

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

[Signature] Wm Mackie

(7) Public, District, Parochial, or Private.

No. 8982.

Jane McCrindle or Hamilton.

(Duchess.)

Adm: 28 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) ~~Sheriff~~ of (2) ~~Stewartry~~ ~~of Kirkcudbright~~ and his Substitutes,—or Sumbitees.

The Petition of William H. Walker. South Corbally, Newabbey,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Walker. South Corbally, Newabbey.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Uncle. is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Walker to the Southern Counties Royal Institution and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) William H. Walker

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of August One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Walker.
2. Sex and Age,	Male 62.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmer.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	South Corbally Newabbey.
7. Place where Found and Examined,	South Corbally Newabbey.
8. Length of time Insane,	One month.
9. Whether First Attack,	Second
10. Age (if known) on First Attack,	56
11. When and where previously under Examination and Treatment (5)	Southern Counties Asylum Dfs
12. Duration of Existing Attack,	One month.
13. Supposed Cause,	Second attack. (Heredity)
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William H. Walker South Corbally Newabbey Nephew.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If Patient has previously in an Asylum, state date of latest admission or appearance therein. If previously under Medical or other treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of August One thousand nine hundred and two

(*To be signed by the party applying*) William H. Walker

T. & A. C.—April 1901. P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Matthew Cameron
being a (1) M.B.C.M Glasgow University.
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) South Corbelly Newabbey Kirkcudbright. in the County
separately from any other Medical Practitioner visited and personally examined (4) James Walker and the said James Walker is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Melancholia Imagines he has spent all his means, has Delusions, and is quite changed in his mental condition

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Nephew William H Walker says his sleeps little is very easily excited, imagines has lost his money and that everything going against him and is very melancholy

Name and Medical Designation, Matthew Cameron M.B.

Place of Abode, Mainsriddell

DATED this Twenty ninth day of August One thousand nine hundred and two

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, John Smith
being a (1) Graduate in Medicine of Edinburgh University
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 47 Castle Dumfries in the County
separately from any other Medical Practitioner visited and personally examined (4) James Walker. Gardener South Corbelly, Newabbey and the said James Walker is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
His insane melancholic appearance and delusions, tells me that he is in poor misery, is cold and hungry, and that in poverty

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
William Hyslop Walker, his nephew informs me that he is mentally and much changed, being continually in miserable condition. He is not in poverty

Name and Medical Designation, John Smith

Place of Abode, 47 Castle St. Dumfries

DATED this 29th day of August One thousand nine hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Matthew Cameron being (1) M B CM. Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) South Corbelly in the County of Kirkcudbright, seen and personally examined James Walker, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) ~~Crichton Royal Institution~~ Dumfries Southern Counties Asylum And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Matthew Cameron

DATED this 29th day of August One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein James Walker to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Nephews.

Signature and Address William H Walker South Corbelly

Date 29th August 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (1) Sheriff-Substitute of ~~Dumfries and Galloway~~, at Dumfries, having had produced to me, with a Petition at the instance of (2) William H. Walker, South Corbelly, Kevanbay, Certificates under the hands of Matthew Cameron and John Smith being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) James Walker, South Corbelly, Kevanbay. Petr. Uncle - and that the said James Walker - is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Walker as a patient into the (5) Public Asylum of Southern Counties at Dumfries, and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Walker, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Second day of September, One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Southern Counties Dumfries.

[Signature] John Clerk

(5) Public, District, Parochial, or Private.

MEDICAL CERTIFICATE. No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, from whom derived.*

I, the undersigned, Matthew Cameron

being a (1) M.B.C.M Glasgow University.

and being in actual practice as a (2) Physician and Surgeon

do hereby certify, on soul and conscience, that I have this day, at (3) South Corbelly, Newabbey, Kirkcudbright. in the County of

separately from any other Medical Practitioner, visited and personally examined (4) James Walker

and that the said James Walker is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Melancholy. Imagines he has spent all his means & poor. Delusions, and is quite changed in his mental condition

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Smith

being a (1) Graduate in Medicine of Edinburgh University

and being in actual practice as a (2) Physician & Surgeon

do hereby certify, on soul and conscience, that I have this day, at (3) 47 Castle Dumfries Dumfries in the County of

separately from any other Medical Practitioner, visited and personally examined (4) James Walker. Farmer South Corbelly, Newabbey and that

the said James Walker is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

His insane melancholic appearance and delusions, tells me that he is in great misery, is ill clad and fed, and that he is in poverty

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

William Nicolson Walker, his nephew informs me that he is mentally very much changed, being of a continually ill & miserable condition. He is not in poverty

Name and Medical Designation, John Smith M.D.

Place of Abode, 47 Castle St. Dumfries

DATED this 29th day of August One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Matthew Cameron being (1) M B C M. Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Stockbridge in the County of Kirkcudbright, seen and personally examined James Walker, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) ~~Southern Counties Asylum~~ Crichton Royal Southern Counties Dumfries And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Matthew Cameron

DATED this 29th day of August One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

eby request the Superintendent of the ~~Southern Counties~~ Crichton Royal Southern Counties sylum Dumfries m to receive therein James Walker om the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Nephew.

Signature and Address

Date 29th August 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (1) Sheriff-Substitute of ~~Dumfries and Galloway~~, at Dumfries, having had produced to me, with a Petition at the instance of (2) William H. Walker, South Corbelly, Newabbey Certificates under the hands of Matthew Cameron and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) James Walker, South Corbelly, Newabbey. (Petr. Uncle) - and that the said James Walker - is a (4) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Walker - as a patient into the (5) Public - Asylum of Southern Counties at Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Walker, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation. Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this First day of September, One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Southern Counties Dumfries.

[Signature] John Clerk

(5) Public, District, Parochial, or Private.

No. 8933.

James Walker.

Adm: 29 August 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway *and his Substitutes, of Dumfries,*

The Petition of John Maxwell. Inspector of the Poor for the Parish of Tregunter

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Rimm, Gardener.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Rimm to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(To be signed by the Party applying) John Maxwell.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty-Ninth (4) day of August — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Thomas Rimm
2. Sex and Age,	Male aged 24 years.
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	Lower King class. Gardener
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	as below
7. Place where Found and Examined,	32. Glasgow St. Maxwelltown
8. Length of time Insane,	Since about February last
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	about 24 years.
11. When and where previously under Examination and Treatment (5)	never under Treatment before
12. Duration of Existing Attack,	Since February last
13. Supposed Cause,	None Known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Tregunter in the first place.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Rimm. Gardener. his father resides at above address.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has previously in an Asylum, state date of latest Order or Appeal thereto. If previously under Examination or Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty-Ninth day of August — One thousand nine hundred and two years

(To be signed by the party applying) John Maxwell
Insp. of Poor.

T. & A. C.—Jan. 1900. Pp

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Peter N Murray
being a (1) graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 32 Glasgow Hill Maxwelltown Dumfries in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Thomas Rimmer Pauper 32 Glasgow Hill and that the said Thomas Rimmer is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Tells me that a in London made them unconscious, & the two among some women - that a Doctor is watching him, and will not leave him alo

2 Other facts (if any) indicating Insanity communicated to me by others: (7) His Father & Mother tell me, that Doctor watching him, and that he threatened Dam

Name and Medical Designation, P Murray MD

Place of Abode, 6 Castle St Dumfries

DATED this 29 day of August One thousand nine hundred 1902

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Peter Murray Ker
being a (1) Bachelor of Medicine and Master in Surg
of the University of Edinburgh
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) 32 Glasgow Hill Maxwelltown Dumfries in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Thomas Rimmer. Pauper 32 Glasgow Hill Maxwelltown and that the said Thomas Rimmer. is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) His insane appearance and manner He has delusions of unseen agency. Believes that he is rendered unconscious at night and blin are taken out of him. Believes that the Police charge with grave offences & that they are constantly watchi

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Ker MB CM

Place of Abode 2 Castle Street Dumfries

DATED this twenty ninth day of August One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Patrick Murray
being (1) graduate of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) 32 Glasgow St
in the County of Kirkcudbright, seen and personally examined
Thomas Kinnin, and that the said Thomas Kinnin
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

P Murray M.D.

DATED this 29th day of August One thousand nine hundred 1902

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Thomas Kinnin. to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, None.

Signature and Address John Maxwell. Insp of Poor Dalbeattie

Date 29th August 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary, (1) ~~Sheriff-Substitute~~ of the ~~County~~ Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) John Maxwell, Inspector of Poor Dalbeattie, Certificates under the hands of Patrick Murray, and Peter Murray Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Thomas Kinnin, Gardener, 32 Glasgow Street, Maxwelltown (a pauper) and that the said Thomas Kinnin is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Kinnin as a patient into the (5) Public Asylum of Southern Counties at Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Kinnin which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this 2nd day of September One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Southern Counties, Dumfries.

[Signature] John Clerk

(5) Public, District, Parochial, or Private.

No. 8934.

Thomas Kinane.

(Inquest)

Adm: 29 August 1952.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~of the (2) Shire~~ of Dumfries & Galloway, and his Substitutes, at Dumfries.

The Petition of James Common, Arkleton Shiels, Ewes Parish, Dumfriesshire

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Grieve Common, your Petitioner's (3) daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Grieve Common to the Southern Counties Asylum — and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) James Common

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty fifth (4) day of August — One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Grieve Common.
2. Sex and Age,	Female 39 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Housework
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Arkleton Shiels, Ewes,
7. Place where Found and Examined,	" "
8. Length of time Insane,	9 years
9. Whether First Attack,	First
10. Age (if known) on First Attack,	30 years
11. When and where previously under Examination and Treatment (5)	Has always been at home
12. Duration of Existing Attack,	9 years
13. Supposed Cause,	Heredity Influenza 2nd Attack
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Common, Arkleton Shiels, Ewes, Near Langholm, Mother three times in Dumfries Asylum
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If previously under Asylum or treatment, state date of latest admission or approximate period thereto. If not previously under Asylum or treatment, so state.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty fifth day of August — One thousand nine hundred and two.

(*To be signed by the party applying*) James Common

T. & A. C.—April 1901. P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, James Inglis Mason being a (1) Bachelor of Medicine, Edinburgh Univ,
and being in actual practice as a (2) Physician and Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Arkleton Sheils, Ewes, Near Langholm in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mary Grieve Common Arkleton Sheils Ewes and the said Mary Grieve Common is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is sullen and refuses to speak when spoken to. At times she breaks out into a torrent of obscene and filthy Language

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her Father James Common says she is easily enraged and is constantly indulging in profane and filthy Language.

Name and Medical Designation, James Inglis Mason M.B.

Place of Abode, Langholm Dumfriesshire

DATED this Twenty Eighth day of August One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Gill
being a (1) Bachelor of Medicine &c. of Edinburgh Univ
and being in actual practice as a (2) physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Arkleton Ewes, Langholm Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mary Grieve Common Arkleton Sheils, Ewes, Langholm and the said Mary Grieve Common is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her appearance & manner are quite those of an insane person, and her Language, which can not be repeated, was filthy & profane.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her Father James Common says this has been usual state lately, and that she often breaks out into bad Language without the least provocation.

Name and Medical Designation, John Gill M.B.

Place of Abode, Langholm

DATED this Twenty seventh day of August One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Inglis Mason being (1) Bachelor of Medicine Edin. Univ. hereby certify, on soul and conscience, that I have this day, at (2) Arbeton Chiels in the County of Dumfries, seen and personally examined Mary Grieve Common, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

James Inglis Mason

DATED this 28th day of August One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum, ~~Asylum~~ to receive therein Mary Grieve Common to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address James Common

Date 29th August 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Clark, Honorary Sheriff-Substitute of ~~Dumfries and Galloway~~, at Dumfries, having had produced to me, with a Petition of the instance of (4) James Common, Arbeton Chiels, Essex, near Langholm, Certificates under the hands of James Inglis Mason, and John Gill being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Mary Grieve Common, Arbeton Chiels, Essex, near Langholm, (his daughter) and that the said Mary Grieve Common is a (6) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Grieve Common as a patient into the (7) Public Asylum of Southern Counties at Dumfries and I authorise her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Grieve Common which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(4) State whether a County or Stewartry.

(4) Insert Name and Designation.

(5) Describe him, and if a Pauper, state so.

(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(7) Public, District, Parochial, or Private.

DATED [at Dumfries] this Thirtieth day of August One thousand nine hundred and two years.

To the Superintendent of the (Public) Asylum of Southern Counties Dumfries.

[Signature] John Clark

(7) Public, District, Parochial, or Private.

No. 8935

Mary Grieve Common.

Adm: 2nd September 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of Stirling ~~of the (2) County~~ of Dumbarton Clackmannan and his Substitutes,—

The Petition of Janet Smillie residing at Ferndean Kirkintilloch

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Smillie

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Husband residing at Ferndean Kirkintilloch is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Smillie to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Janet Smillie. X

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Second (4) day of September One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Smillie
2. Sex and Age,	Male; 73 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Portioner.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Ferndean, Kirkintilloch.
7. Place where Found and Examined,	Ferndean, Kirkintilloch
8. Length of time Insane,	Several months
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	73 years.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Several months.
13. Supposed Cause,	Senility
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Janet Smillie wife, Ferndean, Kirkintilloch. none.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

(5) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of September One thousand nine hundred and two

(*To be signed by the party applying*) Janet Smillie X

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Martin being a (1) Bachelor of medicine and master of surg
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Ferndea
Kirkintilloch
Dumbarton in the County o
separately from any other Medical Practitioner
visited and personally examined (4) James Smellie Ferndea
Kirkintilloch and this
the said James Smellie is a (5) insane
person and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is restless
excitable liable to outbursts of temper, suf
from delusions such as that he possesses cai
belonging to other people

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife informs me that he claims cause tha
he has no right to and when opposed he becomes excit
& furious striking her on several occasions & that he is su
of all his friends conspiring against him

Name and Medical Designation, John Martin M.B.

Place of Abode, Kirkintilloch

DATED this second day of September One thousand
nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Carswell
being a (1) Licentiate of the Royal College of Physicians
and of the Faculty of Physicians & Surgeons Ed
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Ferndea
Kirkintilloch,
Dumbarton in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) James Smellie,
residing there, partner and that
the said James Smellie is a (5) person
and a proper person to be detained
by unsound mind
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is restless a
very excitable in manner and appearanc
and he labours under the influence of curio
delusions, such as, that his neighbours are al
thieves and that he is being fraudulently kept
the possession of property.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife states that he constantly talks
his alleged wrongs that he keeps everybody
about his claims to property, and that he frequ
becomes very excited and violent and has att
both her daughter and herself.

Name and Medical Designation, J. Carswell L.R.C.P.
Place of Abode, 5 Royal Crescent W. Glasg

DATED this Second day of September One thousand
nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Dated this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address ~~Janet Smillie~~ X

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Robert Blair, Esquire, (1) Honorary Sheriff Substitute of the (2) Stirling, Dumbarton and Clackmannan having had produced to me, with a Petition at the instance of (3) Janet Smillie before designed
Certificates under the hands of John Madin
and John Carswell before designed - being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Smillie before designed and that the said James Smillie is a (5) insane person and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Smillie as a Patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Smillie which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated [at Dumbarton] this Second day of September One thousand nine hundred and two

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] R. Blair

No. 8936.

James Smillie.

Adm: 5 September 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of the (2) Shire of Dumfries & Stewartry — and his Substitutes, — at Dumfries.

The Petition of Elizabeth Douglas Hunter Patterson Dunbar Douglas Hunter Johnstone

humbly sheweth that it appears from the subjoined Statement, and accompanying Medical Certificates, that Helen Kirn or Douglas, afterwards Johnstone your Petitioner's (3) Mother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Helen Douglas, Daughter — to the ~~Crieff~~ Dumfries Asylum, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Lizzie Douglas.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 4th (4) day of September, One thousand ~~eight hundred and~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Helen Kirn or Douglas.
2. Sex and Age,	Female, 58 years.
3. Married, Single, or Widowed,	Widow.
4. Condition of Life, and previous Occupation (if any),	Washerwoman.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Kirkpatrick, Dunbarn.
7. Place where Found and Examined,	Kirkpatrick, Dunbarn.
8. Length of time Insane,	Three months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	About 58 years.
11. When and where previously under Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	Treated at home.
12. Duration of Existing Attack,	Three months.
13. Supposed Cause,	Drink & domestic trouble.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name, and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of the Family known to be or to have been Insane,	Elizabeth Douglas. Kirkpatrick. Dunbarn. Daughter. Patient's mother always in some condition.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this [illegible] day of [illegible] One thousand nine hundred and (1902)

(To be signed by the Party applying) Lizzie Douglas.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George Robertson
being a (1) Licentiate of the Royal College of Physicians & Surgeons Edinburgh
and being in actual practice as a (2) resident practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) her house, in Victoria Street Kirkpatrick Durham in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Mrs. Douglas Victoria Street Kirkpatrick Durham Kirkcudbright and that the said Mrs Douglas is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
She sleeps very little, hears voices speaking to her, when she does sleep has bad dreams. Is discontented with her home & wishes away somewhere, to the hills. Thinks that people are talking her. Is melancholic, states that her means are near and a what she will be in want. That everything is against her. On first occasion noticed below she slept for weeks & was maniacal in her conduct, & threatened to do away with herself several occasions. This morning she repeated the attempt by trying to cut her throat.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her daughter Lizzie Douglas informed me that about the 7 May 1902. She tried to poison herself, when she had occasion to take away from her for a little, since sometime she has been maniacal in her conduct & threatened to do away with herself several occasions. This morning she repeated the attempt by trying to cut her throat.

Name and Medical Designation, George Robertson L.R.C.P.

Place of Abode, Kirkpatrick Durham

DATED this fourth day of September, One thousand ~~eight~~ nine hundred and two. Years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Edward Bakeman Hector
being a (1) Graduate in Medicine of the University of Edinburgh
and being in actual practice as a (2) General practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) house in Victoria St. Kirkpatrick Durham, in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Helen Douglas. Victoria Street, Kirkpatrick Durham. Kirkcudbrightshire and that the said Helen Douglas is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
She appeared moody and depressed at the time I examined her. She appeared to be unable to understand fully the questions asked her. She appeared to have difficulty in remembering for things for any length of time.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her daughter, Lizzie Douglas, Victoria St., Kirkpatrick Durham informed me that she has frequently threatened to take away her life, and that this morning she made a deliberate attempt to do so by placing her hand over her mouth & nostrils & compressing her nostrils. That this was the second occasion in her life.

Name and Medical Designation, Edward Bakeman Hector M.B.

Place of Abode Castle Douglas

DATED this fourth day of September, One thousand ~~eight~~ nine hundred and two Years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampion, Esquire, Advocate, Sheriff-Substitute of ~~the~~ (3) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) Elizabeth Douglas, Kirkpatrick-Durham Village, Kirkcudbrightshire, Certificates under the hands of George Robertson, ~~[illegible]~~ and Edward Bateman Hector, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Helen Kirn or Douglas, Kirkpatrick-Durham, ~~(Petitioner)~~, and that the said Helen Kirn or Douglas is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Kirn or Douglas as a Patient into the (6) Public Asylum of Southern Counties, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen Kirn or Douglas which accompanied the said Petition.

DATED this Fifth day of September, One thousand ~~eight~~ nine hundred and two years. ~~Two~~ words deleted.

Geo: Lampion

To the Superintendent of the (7) Public
Asylum of Southern Counties, Dumfries.

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8934

Helen Kinnear Douglas

Adm. 5 September 1908

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Stewartry of Dumfries, Kirkcudbright and his Substitutes,— at Dumfries.

The Petition of My Lord Lyon, King of Arms, Procurator for Her Majesty's Interest in Scotland as Custodier of Lunatics.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sophie Fowden, after designed Pauper,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Sophie Fowden to the Crichton Royal, Dumfries and to sanction her admission into the said Asylum. She is now detained by Mr. Hollen, Inspector of Poor, Mr.

(To be signed by the Party applying)

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 5th (4) day of September, One thousand nine hundred and Thirteen years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Sophie Fowden.
2. Sex and Age,	Female - 41 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Pauper.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Parkhead, Canonbie.
7. Place where Found and Examined,	Parkhead. Do
8. Length of time Insane,	Three weeks.
9. Whether First Attack,	Yes — 1st.
10. Age (if known) on First Attack,	About 56.
11. When and where previously under Examination and Treatment (5)	Crichton Asylum, Dfs.
12. Duration of Existing Attack,	Three weeks.
13. Supposed Cause,	Hereditary.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Canonbie.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Her own relatives. No. wife. Sister. lodged in Asylum about to be visited by.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or appointment thereto. If previously under Examination or treatment elsewhere, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 4th day of September, One thousand nine hundred and Thirteen years.

(To be signed by the party applying) Mr. Hollen, Inspector of Poor, Mr.

T. & A. C.—Jan. 1900.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Bell Morehead [illegible] being a (1) Graduate of Edinburgh Universit[illegible] and being in actual practice as a (2) Genuine Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) 6 Cas[illegible] Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Margaret Lowden Pauper Barjarg — and that the said Margaret Lowden — is a (5) Person of Unsound Mind — and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She very excited & restless says she hears people & sees things that are not & such like talk & says she hears bodies dead & alive in the Creation above & elsewhere.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) has been twice in an Asylum previously.

Name and Medical Designation, A. B. Morehead

Place of Abode, 18 Castle St Dumfries

DATED this 4th day of Sept. — One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Patrick Munro — being a (1) Graduate of Edinburgh University — and being in actual practice as a (2) Physician — do hereby certify, on soul and conscience, that I have this day, at (3) Barjarg Cauldmarks Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Margaret Lowden Pauper Barjarg — and that the said Margaret Lowden — is a (5) Person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is a state of excitement, hyperkinesis & incoherence, says she has visions, says she can authorise that the excitement is on the heart.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Has been in the Asylum three times.

Name and Medical Designation, P. Munro M.D.

Place of Abode Castle St Dumfries

DATED this 4th day of Sept — One thousand nine hundred and (1902).

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Dall MacDonald being (1) MD Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Patient's Res in the County of Dumfries, seen and personally examined Margaret Lowden Semple, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

A Dall MacDonald MD.

DATED this 4th day of Sept. One thousand nine hundred and Two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Maggie Lowden, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Wm. Lowden, Inspector of Poor

Signature and Address Wm. Lowden Dumfries

Date 5th Sept 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire (1) Honorary Sheriff-Substitute of the (2) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) Thomas M'Clurean, Inspector of Poor, Sanquharrock, Certificates under the hands of Alexander Dall MacDonald, and Patrick Murray being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Maggie Lowden, Bankend, Sanquharrock (Pauper), and that the said Maggie Lowden, is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Maggie Lowden as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Maggie Lowden which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Eighth day of September One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] John Clerk

No. 8938

Margaret Lowden

(Tavistock)

Adm. 5 September 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries & Galloway and his Substitutes, at Dumfries.

The Petition of Mary Pauline Doyle (Mother Pauline) Birnieknowe. Auchinleck. Ayrshire

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen O'Dwyer, Birnieknowe, aforesaid Companion

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Helen O'Dwyer to the Archbishop Eyre Institution, Dumfries and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Mary Pauline Doyle

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this ~~eight~~ 9th (4) day of September One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Helen Dwyer (Sister Helena)
2. Sex and Age,	Female age 30
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Teacher R.C. School.
5. Religious Persuasion, so far as known,	R. Catholic.
6. Previous Place of Abode,	Rollon.
7. Place where Found and Examined,	Birnieknowe Auchinleck
8. Length of time Insane,	One week.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	30.
11. When and where previously under Examination and Treatment (5)	Never.
12. Duration of Existing Attack,	One week
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Edmund O'Dwyer. Rathkea Co Tipperary
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has previously in an Asylum, state date of latest admission or approximate. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this eighth day of September One thousand nine hundred and two

(*To be signed by the party applying*) Mary Pauline Doyle

P. p.

T. & A. C.—March 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an Idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Gilmour Kerr
being a (1) M.B., C.M. of Glasgow University
and being in actual practice as a (2) Physician & Surgeon.
do hereby certify, on soul and conscience, that I have this day, at (3) Bernuchy Convent, Auchinleck
in the County of Ayr separately from any other Medical Practitioner,
visited and personally examined (4) Helen O'Dwyer, Teacher Bernuchy Convent, Auchinleck and that
the said Helen O'Dwyer is a (5) person of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Inability to hold rational conversation; her manner and conduct quite out of accordance with her usual habits. She is irritable & outrageous in her conduct and incoherent in her statements.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By Pauline Doyle state that she sat & brooded in her room & suddenly bursts either into loud plaintive Complaints or outrageous in her manner & occasionally violent & foul language.

Name and Medical Designation, John Gilmour Kerr M.B.

Place of Abode, Stepend Cumnock

DATED this Eight day of September One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Glasgow University and Surgeon & Physician & Surgeon
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution in the County of Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Helen O'Dwyer, Teacher Bernuchmore, Auchinleck, Ayrshire and that
the said Helen O'Dwyer is a (5) person of Unsound mind. and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Cannot engage in conversation, laughs without apparent Cause, and talks quite incoherently.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, 27 Castle St., Dumfries

DATED this Tenth day of September One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned John Gilmour Kerr
being (1) Med., Grad. of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) Birnieknowe Cottage Auchenleck
in the County of Ayr, seen and personally examined Helen O' Dwyer, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution, Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of Residence.

(3) State place at which Asylum is situated.

John Gilmour Kerr Med. Gra.

DATED this Eight day of September One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Helen O'Dwyer to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Guardian

Signature and Address Mary Pauline Doyle

Date 8th Sep. 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary (1) Sheriff Substitute of the (2) Dumfries and Galloway at Dumfries—having had produced to me, with a Petition at the instance of (3) Mary Pauline Doyle, Birnieknowe, Auchenleck, Ayrshire—Certificates under the hands of John Gilmour Kerr, and Alexander Thomson—being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Helen O'Dwyer, Birnieknowe, Auchenleck, Ayrshire, (Patient Companion) and that the said Helen O'Dwyer— is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen O'Dwyer— as a Patient into the (6) Public— Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen O'Dwyer— which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries—] this Tenth — day of September One thousand nine hundred and two years

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution

[*Signature*] John Clerk

(7) Public, District, Parochial, or Private.

No. 8939.

Helen O'Dwyer.

Adm. 8 September 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) County~~ of ~~Dumfries~~ and his Substitutes, at Dumfries,

The Petition of James Richardson Inspector of Poor Middlebie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Campbell, Solway Cottage Kirtlebridge,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Campbell to the Broughton Royal Asylum and to sanction her admission into the said Asylum.

(To be signed by the Party applying) James Richardson Inspector of Poor

(4) The date of the Petition must be within fourteen clear days ~~eight~~ following the dates of the Medical Certificates.

DATED this ninth (4) day of September One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Janet Campbell
2. Sex and Age,	Female 44 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Housekeeper
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Grahamshill Kirkpatrick F.
7. Place where Found and Examined,	Solway Cottage Kirtlebridge
8. Length of time Insane,	one week
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	44.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	Nervousness
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Middlebie (Meantime)
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	David Campbell Solway Cottage Kirtlebridge Her Husband
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) Give last date only in an order, stating date of latest order or approximate date. If only under observation or treatment, so state.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this ninth —day of September— One thousand nine hundred and two

(To be signed by the party applying) James Richardson Inspector of Poor.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Carruthers
being a (1) Mem. Roy. Coll: Phys: Edin.
and being in actual practice as a (2) general medical practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Solway Cottage, Kirkcudbright in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Janet Campbell, Solway Cottage, Kirkcudbright pauper — and that the said Janet Campbell — is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Patient has for many weeks been in a nervous depressed state of mind; has slept very little without any apparent cause for the sleepless ness -

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband and her neighbours-wife both say that Patient is subject to violent outbursts in which she attacks her children and assaults them.

Name and Medical Designation, William Carruthers M.B.C.M.

Place of Abode, Kirkpatrick Flemm

DATED this eighth day of September One thousand eight hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Gilroy
being a (1) Bachelor of Medicine & Glasgow University, Licentiate of the Faculty of Physicians & Surgeons
and being in actual practice as a (2) Physician & Surgeon Solway Cottage
do hereby certify, on soul and conscience, that I have this day, at (3) Kirkcudbridge Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Campbell, Pauper and that the said Janet Campbell — is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
The Patient tells me she feels there impulses to Violence coming on her and she is powerless to resist them. She says she has very queer feelings in her head and feels she must be restra

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her husband tells me she attacks her children & that she keeps Home in a perma and gets no sleep

Name and Medical Designation, James Gilroy M.B.

Place of Abode Waterhook Kirkcudbright

DATED this Eighth day of Sept — One thousand eight hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, William Carruthers
being (1) Fellow Roy Coll Phys Edinr
hereby certify, on soul and conscience, that I have this day, at (2) Solway Cottage
in the County of Dumfries, seen and personally examined
Janet Campbell, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

William Carruthers

DATED this eighth day of September One thousand ~~eight~~ nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum
~~Asylum~~ to receive therein Janet Campbell
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Pauper

Signature and Address James Richardson Inspector of Poor
Dfs. 9 September 1912.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary Sheriff Substitute,
of the (1) Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) James
Richardson, Inspector of Poor, Middlebie,
Certificates under the hands of William Carruthers
and James Gilroy, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Janet Campbell, Solway Cottage, Kirtlebridge (a pauper) and that the said Janet Campbell — a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Campbell — as a Patient into the (5) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Campbell which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Tenth day of September
One thousand ~~eight hundred and~~ nine hundred and two years
Four words deleted

To the Superintendent of the (5) Public
Asylum of Crichton Royal Institution

(5) Public, District, Parochial, or Private.

[*Signature*] John Clerk

No. 8940.

Janet Campbell.

(Middlebie)

Actn. 9 September 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Dumfries and Galloway and his Substitutes,—at Dumfries

The Petition of John Maxwell Inspector of the Poor for the Parish of Irongeer—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Marion Kirkpatrick.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Ranger is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Marion Kirkpatrick, — to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) John Maxwell.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Ninth (4) day of September One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Marion Kirkpatrick
2. Sex and Age,	Female. 19 past.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Working class. Millworker.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	16, College St. Maxwelltown
7. Place where Found and Examined,	Same place as above.
8. Length of time Insane,	Since Coronation day.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	19 years past.
11. When and where previously under Examination and Treatment (5)	Never under Treatment before.
12. Duration of Existing Attack,	Since the Kings Coronation day.
13. Supposed Cause,	Drugs of Influenza.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Irongeer in the first place. May turn on Dumfries.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Father. Robert Kirkpatrick Blacksmith resides at Laborers addition Had a sister Jane in the asylum. Was discharged. 2 years past last March.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) Patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Ninth day of September One thousand nine hundred and two years

(*To be signed by the party applying*) John Maxwell.
Insp: of Poor. Irongeer

T. & A. C.—Jan. 1900.

No. 8940.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray
being a (1) Graduate of the Edinburgh University,
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 16 College
Maxwelltown Dumfries
Kirkcudbright separately from any other Medical Practitioner, in the County of
visited and personally examined (4) Marion Kirkpatrick Paup
and that
the said Marion Kirkpatrick Pauper is a (5) Person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Says She cannot
because her Mate has a Letter from
She has, that her "Mate" had told her
her "Lad" did not care for her, at times
is very excitable, at other times depressed.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her Mother tells me, that She cannot
a simple message, that as soon as She
has fits of a weak, She gets Red, then
then to the next fit

Name and Medical Designation, P Murray M.D.

Place of Abode, 6 Castle St Dumfries

DATED this 9th day of Sept One thousand
nine hundred 1902

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Dewar Robson
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 16 Colleges
Maxwelltown, Dumfries in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Marion Kirkpatrick, Pauper
16 College St. Maxwelltown, and that
the said Marion Kirkpatrick pauper (5) person of
unsound mind. and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Her conduct &
behaviour are strange. She eats most
immediately ravenously. won't work, & goes about
half dressed. She is at times excitable & at
melancholic. Refuses to answer questions.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Dewar Robson.

Place of Abode 7 Terraglen St Maxwelltown

DATED this Eighth day of September One thousand
nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Dewar Robson
being (1) Bachelor of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) 16 College St
in the County of Dumfries, seen and personally examined
Marion Kirkpatrick, Pauper. , and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a
sufficient good state of bodily health at this date to be removed to the Asylum
at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

John Dewar Robson M.B.

DATED this ninth day of September One thousand nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Marion Kirkpatrick to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address John Maxwell, Troqueer

Date 9th Sept. 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary (1) Sheriff-Substitute of the (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) John Maxwell, Inspector of Poor, Troqueer, Certificates under the hands of Patrick Murray and John Dewar Robson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Marion Kirkpatrick, 16 College Street, Maxwelltown (a pauper) and that the said Marion Kirkpatrick is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Marion Kirkpatrick as a patient into the (6) Public Asylum of Southern Counties at Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Marion Kirkpatrick which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Tenth day of September, One thousand nine hundred and two years.

To the Superintendent of the (6) Public Asylum of Southern Counties, Dumfries.

[Signature] John Clerk

(6) Public, District, Parochial, or Private.

No. 8941.

Marion Kirkpatrick

(Trawler)

Adm: 9 September 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2)
of Dumfries & Galloway and his Substitutes,—at Dumfries,
The Petition of Charles Holmes Joy, Manor House, Tamworth
humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Holmes Joy, Manor House, Tamworth
your Petitioner's (3) father
is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Holmes Joy to the Crichton Royal Institution — and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Charles Holmes Joy

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fifteenth (4) day of September — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Holmes Joy
2. Sex and Age,	male 60 1/12 years
3. Married, Single, or Widowed,	widower
4. Condition of Life, and previous Occupation (if any),	Physician
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Manor House Tamworth Staffs
7. Place where Found and Examined,	Manor House Tamworth Staffs
8. Length of time Insane,	five months
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	60 1/12 years
11. When and where previously under Examination and Treatment (5)	Craig House Edinburgh
12. Duration of Existing Attack,	five months
13. Supposed Cause,	hereditary - gout - worry - fall
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	yes - threatens
16. Whether Dangerous to others,	threatens he must kill someone
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Charles Holmes Joy Eldest Son Manor House Tamworth second Son mentally deficient Cousin melancholia
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or approximate date thereto. If previously under Treatment or Examination, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 13th — day of September — One thousand nine hundred and two years

(To be signed by the party applying) Charles Holmes Joy

P.

T. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Hubert Harry Hollick

being a (1) Member of Royal College of Surgeon of Eng & the Royal College of Physicians London.

and being in actual practice as a (2) Physician & Surgeon

do hereby certify, on soul and conscience, that I have this day, at (3) Lichfield Tamworth Staffordshire in the County

separately from any other Medical Practitioner visited and personally examined (4) John Holmes Joy of Tamworth. Staffordshire and the said John Holmes Joy is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

He is morbidly depressed, says he is dying, & that head is coming off. Four days ago when I was with him, he threatened to jump out of the Hotel window.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His son, Dr C. H. Joy, Tamworth. Staffordshire, informed me that, this whilst on a visit to his father was having enema, his father said if he (the patient) was coming out of his mouth.

Name and Medical Designation, Hubert Harry Hollick

Place of Abode, Lichfield St., Tamworth.

DATED this 13th day of September One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Edmund Bowles Whitcombe

being a (1) Bachelor of Medicine

and being in actual practice as a (2) physician

do hereby certify, on soul and conscience, that I have this day, at (3) The Manor House, Tamworth in the County Stafford separately from any other Medical Practitioner visited and personally examined (4) John Holmes Joy. of Manor House Tamworth and the said John Holmes Joy is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is depressed and miserable. has lost all energy interest in life, he told me he stood over boiling for half an hour and could not take he refuses food. fancies it is blocking his bowels. has lost all control over him

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Dr Chas. H. Joy of Manor House Tamworth states that his father (J. H. Joy) has threatened suicide, and that he has said "he must kill some one"

Name and Medical Designation, E. B. Whitcombe M.B.

Place of Abode, City Asylum, Birmingham

DATED this twelfth day of September One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hubert Harry Hollick being (1) a member of the Royal College of Surgeons, a licentiate of Royal College of Physicians hereby certify, on soul and conscience, that I have this day, at (2) Lichfield St. Tamworth in the County of Staffordshire, seen and personally examined John Holmes Joy, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State Medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

Hubert Harry Hollick M.R.C.S. L.R.C.P.

DATED this 13th day of September One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Dumfries Asylum to receive therein John Holmes Joy to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Eldestson

Signature and Address Charles H Joy Manor House Tamworth

Date 13th September 1908.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire, Advocate, Sheriff-Substitute of (4) Dumfries & Galloway at Dumfries, having had produced to me, with a Petition at the instance of (5) Charles Holmes Joy, Manor House, Tamworth, Certificates under the hands of Hubert Harry Hollick, and E. B. Whitcombe, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) John Holmes Joy, Manor House, Tamworth (Christian Name in full) and that the said John Holmes Joy is a (7) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Holmes Joy as a patient into the (8) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Holmes Joy, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(5) State whether a County or Stewartry.

(6) Insert Name and Designation.

(7) Describe him, and if a Pauper, state so.

(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(8) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Sixteenth, day of September, One thousand nine hundred and two years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution.

(8) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8942

John Holmes Foy.

Adm: 13 September 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of ~~Dumfries~~ Galloway *and his Substitutes,*—

The Petition of William Miller, Inspector of Poor of the Parish of Inch humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charlotte Fleming or Henderson your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Charlotte Fleming or Henderson to the Southern Counties Asylum and to sanction her admission into the said Asylum. (*One word to be delete*)

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) W. Miller

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fifteenth (4) day of September One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Charlotte Fleming or Henderson
2. Sex and Age,	Female, 40 years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Pauper. Laundry maid
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Float Bay Stonykirk
7. Place where Found and Examined,	Low Balyett.
8. Length of time Insane,	~~Uncertain~~ Doubtful
9. Whether First Attack,	Not certain but grounds for supposing not first attack
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	Boulder City, West Australia
12. Duration of Existing Attack,	Three days
13. Supposed Cause,	Religious mania
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Inch against some other Parish
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Nelly Henderson, Balyett. Daughter. Not known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under Examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fifteenth day of September One thousand nine hundred and two

(*To be signed by the party applying*) W. Miller

P p.

T. & A. C.—Feby. 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Andrew Cluckie
being a (1) Bachelor of Medicine etc Glasg Univ
and being in actual practice as a (2) Physician & Surgeon
do hereby certify on soul and conscience, that I have this day, at (3) Low Back
Parish of Inch
Wigtown
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Charlotte Fleming or Henderson
and that
the said Charlotte Fleming or Henderson is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

1 She talks in an incoherent fashion
2 She is continually talking about religious subjects, saying that she died for sins and that the Gospel of Luke was written by
3 She does not sleep at night but remains up different sub

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Hyslop Barbadet says that she not sleep at night for her talking about religion and the bible,

Name and Medical Designation, Andrew Cluckie M.

Place of Abode, 75 George St Stran

DATED this Fifteenth day of September One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Thomas Haspie
being a (1) Bachelor of Medicine and Master of Surg
Aberdeen University
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Lower Ba
in the Parish of Inch
Wigtown
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Charlotte Fleming or
Henderson
and that
the said Charlotte Fleming or Henderson is a (5) Person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

(1) She talks in an incoherent manner
(2) Her talk is chiefly religious and that
died for Sinners and that certain p
of the Bible was written about her

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Hyslop informs me that she keep
talking about religious matters and is con
very intent with a Bible in her hands

Name and Medical Designation, Thomas Haspie MB

Place of Abode Hanover House Stranra

DATED this Fifteenth day of September One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Cameron Esquire (1) Honorary Sheriff Substitute
of the (2) Sheriffdom of Dumfries and Galloway
having had produced to me, with a Petition at the instance of (3) William Mullen
Inspector of the Poor of the Parish of Ruthwell
Certificates under the hands of Andrew Cluethe, M. B. &c
and Thomas Hanger M. B. &c being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Charlotte Fleming or Henderson pauper and that the said Charlotte Fleming or Henderson is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charlotte Fleming or Henderson as a patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Charlotte Fleming or Henderson which accompanied the said Petition.

DATED [at Stranraer] this fifteenth day of September One thousand nine hundred and two

To the Superintendent of the (7)
Southern Counties Asylum of Dumfries

[Signature] John Cameron

A. F.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8943

Charlotte Fleming or Henderson

(Duck)

Adm: 16 September 1902.

16,308.

[FORM B.

25 and 26 Vict. Cap. 54, Sect. 16.

GENERAL BOARD OF LUNACY 16 SEP 1908 SCOTLAND

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned George D. Baillie, Inspector of Poor, Stranraer being desirous to transfer Henry O'Neil at present a Patient in the Asylum ——— and (1) a pauper Lunatic of the Parish of which I am Inspector of Poor ——— from the said Asylum to the Southern Counties Asylum, Dumfries

(1) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Henry O' Neil
2. Sex and Age,	Male. 32 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Labourer. Formerly Soldier.
5. Religious Persuasion, so far as known,	Rom. Catholic.
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	Stranraer.
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	Mother, Mrs. Chas. McDowall, Backrampart, Stranraer. None

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(Signature of Applicant) Geo. D. Baillie

(2) Insp. of Poor, Stranraer

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 15th day of September One thousand nine hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Charles Crenhull Easterbrook hereby certify that I have this day at (1) Ayr District Asy personally examined Henry O'Neill who has been Patient in said Asylum since (2) 10th August 1902 and I certify th the said Patient is a person of unsound mind, (3) is not epileptic, (4) is suicid (3) is not dangerous to others. I also certify, with respect to the Mental State the Patient, that (4) he suffers from mania with delusions of persecution

and with respect to the Bodily State of the Patient, that (5) they are

Average.

and that there is nothing in the Mental or Bodily State of the Patient to make remov to the (1) Crichton Royal Institution Asylum inadvisable; a I further certify that (6) the following facts known to me as to the pa history of the Patient, bearing upon risk of suicide or danger to others, which I thi ought to be brought under the notice of those who are to have charge of the Patient:—

Previous to admission he was apprehended by the Police for trying to cut h throat & for making a distur

(Signature) C C Easterbrook

(Medical Qualification) M.A., M.R.C.P.

(Date) 13th September 1902

(1) Name Asylum.

(2) Insert Date of Admission.

(3) Insert "is," or "is not," as the case may be.

(4) Describe Mental State.

(5) Describe Bodily State.

(6) Insert "the following are," or "there are no," as the case may be.

8944 Henry O'Neil
Adm. 20 Sept: 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfe of Henry O'Neil
from Ayr District Asylum
to Crichton Royal Institution, Dumfries
and the Board having considered such Application and the accompanying Medica Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

Thos Fraser. Commissioner.

DATED at Edinburgh, this 16th day of September, One thousand ~~eight~~ nine hundred and two.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

11th August, 1902

N B.—*This Form should remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[FORM A]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway, and his Substitutes, at Dumfries;

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Archibald macDonald, alleged lunatic, your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Archibald macdonald, — to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying).... Miles Mc Innes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty fourth (*) day of September One thousand eight hundred and Two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Archibald macdonald
2. Sex and age,	Male
3. Married, Single, or Widowed,	—
4. Condition of Life, and previous Occupation (if any),	—
5. Religious Persuasion, so far as known,	—
6. Previous place of abode,	—
7. Place where found and examined,	Dumfries Burgh Police Office.
8. Length of time Insane,	
9. Whether First Attack,	
10. Age (if known) on First Attack,	
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	
12. Duration of Existing Attack,	
13. Supposed Cause,	
14. Whether Subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Grs. Dumfries.
18. Date of becoming Chargeable,	22nd Sept. 1902.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	Want of Information.

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty Second day of Sept. One thousand ~~eight~~ Nine hundred and Two years.

(To be signed by the party applying)..... Miles Mc Innes

MEDICAL CERTIFICATE, NO. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Peter Murray Kerr, being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and being in actual practice as a (2) General Practitioner do hereby certify, on Soul and Conscience, that I have this day, at (3) Burgh Police Office, Dumfries, separately from any other Medical practitioner, visited and personally examined (4) Archibald Macdonald, pauper, and that the said Archibald Macdonald is a (5) person of sound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

His insane appearance and manner. He mildly excited. Constantly shouting & yelling. Incoherent in speech.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr MBCM

Place of Abode, 39 Castle Street Dumfries

DATED this twenty-third day of September, One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, NO. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George Robert Livingston being a (1) Bachelor of Medicine and Master in Surgery of Edinburgh University and being in actual practice as a (2) Physician & Surgeon do hereby certify, on Soul and Conscience, that I have this day, at (3) Crichton Royal Institution, Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Archibald Macdonald, pauper, and that the said Archibald Macdonald, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

His insane appearance & manner. His incoherent rambling conversation His grandiose ideas of his own importance Habits — &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Geo. R. Livingston M.B. C.M.

Place of Abode, 35 George Street Dumfries

DATED this twenty-third day of September, One thousand ~~eight~~ nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr
being (1) Graduate in Medicine
hereby certify, on Soul and Conscience, that I have this day, at (2) Burgh Police Office, Dumfries,
in the County of Dumfries, seen and personally examined Archibald Macdonald, —, and that the said Person is of unsound mind, and a proper Patient to be placed in an Asylum.

(1) State Medical qualification.
(2) State place of Examination.

And I further certify that the case of the said person is one of Emergency.

* and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr.

Dated this twenty second day of September — One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein Archibald Macdonald to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor Dumfries

Signature and Address, Miles McInnes 26 Queen St

Date, 22nd Sept. 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute of ~~the County of~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (1) Miles McInnes, Inspector of Poor Dumfries, Certificates under the hands of Peter Murray Kerr, and George Rae Livingston, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Archibald Macdonald, Burgh Police Office, Dumfries, Prisoner and that the said Archibald Macdonald, is a (3) person of unsound mind, and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Archibald Macdonald as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize ~~his~~ Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Archibald Macdonald which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

Dated this twenty fourth day of September, One thousand ~~eight~~ nine hundred and two years. Four words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo: Campion

No. 8945.

Name Archibald Macdonald.
(Dumfries)

Date of Admission 22nd Sept: 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway *and his Substitutes,* — at Dumfries: —

The Petition of Eliza Millen, 73 University St: Belfast:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Jane Millen ——— your Petitioner's (3) daughter, ———

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Jane Millen ——— to the Crichton Institution, Dumfries, and to sanction the admission into the said Asylum.

(To be signed by the Party applying) Eliza Millen

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty fourth day of September, One thousand nine hundred and two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Jane Millen.
2. Sex and Age,	Female, between 40 and 50.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	No occupation
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	73 University St: Belfast.
7. Place where Found and Examined,	73 University St: Belfast
8. Length of time Insane,	About three months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	About three months.
13. Supposed Cause,	Possibly climacteric
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No, although rough in behaviour.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Eliza Mrs Millen, 73 University St, Belfast — Mother. — One sister, insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an asylum, state date of latest admission or approximate thereto. If previously under examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty fourth day of September, — One thousand nine hundred and two years.

(To be signed by the party applying) Eliza Millen

C. & A. C.—March 1902. P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Simpson Hogg, M.D., ——— being a (1) Licentiate of the Royal College of Physicians Surgeons Edinburgh, and of the Faculty of Physicians & Surg and being in actual practice as a (2) Physician & Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) 73 University Belfast ——— in the County Antrim ——— separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Jane Millen, of 73 University St. Belfast ——— and the said Elizabeth Jane Millen ——— is a (5) person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Restless manner meaningless talk. Statements made by her viz. "that the servant was putting poison in the food, that they were starving and without food in the house, and that they were in poverty, that all her friends and acquaintances were conspiring against her." None of which statements have any foundation in fact."

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The following facts obtained from her mother. That she refused to take food, scarcely slept night or day, and thought her mother and a little girl in whom she was interested were ill, as well as facts stated in No 1.

Name and Medical Designation, Thomas S. Hogg B.A. L.R.C.S.

Place of Abode, 6 Clonard Terrace, Belfast

DATED this Twenty third day of September, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Keay, ——— being a (1) Fellow of the Royal College of Physicians ——— and being in actual practice as a (2) Physician ——— do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution, Dumfries, — in the County of Dumfries — separately from any other Medical Practitioner visited and personally examined (4) Miss Elizabeth Jane Millen from 73 University Street, Belfast ——— and the said Elizabeth Jane Millen, — is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is morbidly depressed and restless and labours under delusions. She tells me she has had no food & is starving, which I know to be not the case. She is extremely agitated, wringing her hands and moaning. She looks very miserable.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Nurse Jessie MacDermott, Crichton Royal informs me that Miss Millen is very restless and sleepless. That she will not remain in bed and that she refuses food, believing it to be poisoned.

Name and Medical Designation, John Keay. M.D. D.P.H.

Place of Abode, District Asylum. Dumfries

DATED this 26th day of September, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas S. Hogg, B.A. L.R.C.S. & L.R.C.P.E. being (1) Fellow of Physicians & Surgeons Licentiate of the Royal hereby certify, on soul and conscience, that I have this day, at (2) 73 University St Belfast in the County of — Antrim —, seen and personally examined Elizabeth Jane Millen, —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of residence.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Thomas S. Hogg Belfast

DATED this twenty third day of September, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Institution Asylum to receive therein Elizabeth Jane Millen, — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother.

Signature and Address Eliza Millen 73 University St Belfast.

Date 23rd Sept. 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire Honorary (1) Sheriff Substitute of the (2) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (3) Eliza Millen 73 University Street, Belfast, Certificates under the hands of Thomas Simpson Hogg, and John Keay being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Jane Millen, 73 University Street, Belfast, Spinster, aged 45 years, and that the said Elizabeth Jane Millen is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Jane Millen as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Jane Millen which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twenty sixth day of September One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] John Clerk

No. 8946.

Elizabeth Jane Drillen.

Adm: 24th September 1902.

16,318.

[Form B[2]]

25 *and* 26 *Vict. Cap.* 54, *Sect.* 16.

GENERAL BOARD OF LUNACY
22 SEP 1898
SCOTLAND

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned Annie Parker, Dawan. St Leonards Ross ayr, being desirous to transfer John Parker at present a Patient in Glasgow Royal asylum, and (1) whose nearest relative I am from the said Asylum to the Crichton Royal asylum. Dumfries beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

(1) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	John Parker
2. Sex and Age,	Male 40
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Average Adjuster
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	—
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	His sister the applicant Annie Parker, Dawan, St Leonards Ross ayr. Yes. Uncle was insane

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(*To be signed by the Applicant*) Annie Parker

(2) Sister

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

Dated this 18 day of September One thousand ~~eight~~ nine hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Landee R. Oswald hereby certify that I have this day at (1) Glasgow Royal Asylum personally examined John Parker who has been a Patient in said Asylum since (2) 30th Nov. 1899 and I certify that the said Patient is a person of unsound mind, (3) is not epileptic, (3) is not suicidal, (3) may be dangerous to others. I also certify, with respect to the Mental State of the Patient, that (4) He is Delusive eg. he imagines Patients & attendants have been murdered here & that he has seen their blood. He is at times violent in conduct breaking glass & crockery & tearing his clothes. He at times refuses food & is

and with respect to the Bodily State of the Patient, that (5) They are fair

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Crichton Royal ——— Asylum inadvisable; and I further certify that (6) ~~there are no~~ facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient :—

He has recently been worse than usual, has refused food, and has broken several panes of glass without reason.

(Name) L. R. Oswald

(Medical Qualification) M.B.

(Date) 20. Sept. 1902.

(1) Name Asylum.

(2) Insert Date of Admission.

(3) Insert "is," or "is not," as the case may be.

(4) Describe Mental State.

(5) Describe Bodily State.

(6) Insert "the following are," or "there are no," as the case may be.

No. 8947
John Parker
Admr. 30 September 1902

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer of John Parker from Glasgow Royal Asylum to Crichton Royal Institution, Dumfries, and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

J W Scott Secretary.

DATED at Edinburgh, this 22nd day of September, One thousand ~~eight~~ nine hundred and two

Date of Sheriff's Order [*to be inserted at the Office of Board*].

21st December, 1896

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries & Galloway ——— *and his Substitutes,*— at Dumfries:

The Petition of Mrs Alice Matheus, Glenburnie, Tavistock, Devon;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Joseph Matheus, ———

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) ——— Husband, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Charles Joseph Matheus, ——— to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Alice Matheus

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Second (4) day of October, — One thousand nine hundred and two years. -

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Charles Joseph Matheus.
2. Sex and Age,	Male - aet 42.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Engineer.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Salisbury, South africa.
7. Place where Found and Examined,	Glenburnie, Tavistock.
8. Length of time Insane,	Seven weeks.
9. Whether First Attack,	1st attack
10. Age (if known) on First Attack,	42.
11. When and where previously under Examination and Treatment (5)	None.
12. Duration of Existing Attack,	Six to seven weeks.
13. Supposed Cause,	Malarial Fever.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Yes at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not a pauper.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Major Matheus, Woodside, Tavistock. (Father). ——— Devon. None at any time.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	———

(5) Patient has previously been in an Asylum, state date of latest admission, or approximate date thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of October, — One thousand nine hundred and two years.

(To be signed by the party applying) Alice Matheus

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Charles Cumberland Brodrick being a (1) Member of College of Surgeons & Physicians

and being in actual practice as a (2) Physician & Surgeon. Glenburnie do hereby certify, on soul and conscience, that I have this day, at (3) Hardwicke House Devon, in the County of Devon, separately from any other Medical Practitioner visited and personally examined (4) Charles Joseph Mathews, of Glenburnie Tavistock and that the said Charles Joseph Mathews is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Cut his Throat. Realises, says he leaves everything to the Almighty; he says millions of years have passed since Jesus his Saviour age. Thinks there are to dry

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Nurse Anstey. Person watches in bed. Says he has a Electric Machine under his bed. Tries to tear off his bandages off his neck

Name and Medical Designation, Charles Cumberland Brodrick

Place of Abode, Hardwicke House Tavistock Devon

DATED this 30th day of September, One thousand nine hundred and Two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, James Snowden Smith being a (1) Member of Royal College of Surgeons En

and being in actual practice as a (2) Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) Glenburnie Tavistock Devon, separately from any other Medical Practitioner, visited and personally examined (4) Charles Joseph Mathews, and that the said Charles Joseph Mathews is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He has a dai

Leavy depression. Be suspicious & re disinclined to speak. Says he is all mixed up. Becomes at times violent & excitable

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Al

Mrs Mathews wife states that he is at times very violent. Cut his throat six weeks ago. Constantly says that it is God's will. Sometime depressed & at other times excitable.

Name and Medical Designation, James Snowden Smith M.R.C.S.

Place of Abode, 32 West St Tavistock Devon

DATED this 30th day of September, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, being (1) Charles Cumberland Bredrick ~~L.R.C.P.S.~~ L.R.C.P. Edin. hereby certify, on soul and conscience, that I have this day, at (2) Jamestock in the County of Devon, seen and personally examined Charles Joseph Mathews, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries, N. B.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

C. Cumberland Bredrick

DATED this 30th day of Sept. - ~~One thousand~~ 1912.
nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Charles Joseph Mathews - to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Wife.

Signature and Address Alice Mathews.

date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of ~~the~~ (4) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) Mrs Alice Mathews, Glenburnie, Jamestock, Devon, Certificates under the hands of Charles Cumberland Bredrick, and James Snowden Smith being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Charles Joseph Mathews Glenburnie, Jamestock, Devon and that the said Charles Joseph Mathews is a (7) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charles Joseph Mathews, as a Patient into the (8) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Charles Joseph Mathews, - which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(5) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(8) Public, District, Parochial, or Private.

DATED [at Dumfries] this Third day of October One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (9) Public
Asylum of Crichton Royal Institution, Dumfries.

(9) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

No. 8948.

Charles Joseph Matheus

Adm. 1 October 1952.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries and Galloway — *and his Substitutes,—*

The Petition of Mary Edgar of Lummis residing at Hazledean Cottage Lockerbie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Henry Lummis residing at Hazledean Cottage aforesaid your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Henry Lummis — to the Crichton Royal Institution — and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Mary Lummis

DATED this third — (4) day of October — One thousand nine hundred and two

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	John Henry Lummis
2. Sex and Age,	male aged 69 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Clergyman
5. Religious Persuasion, so far as known,	Congregational.
6. Previous Place of Abode,	Birmingham
7. Place where Found and Examined,	Lockerbie.
8. Length of time Insane,	about two months
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	69.
11. When and where previously under Examination and Treatment,	—
12. Duration of Existing Attack,	2 mos.
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no
16. Whether Dangerous to others,	violent when restrained
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mary Lummis Hazledean Cottage Lockerbie. wife
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this third — day of October — One thousand nine hundred and two

(*To be signed by Party applying*) Mary Lummis

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, J. Bell
being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3)
Hazeldean Cottage, Lockerbie in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) John Henry Lummis, retired
Clergyman, Hazeldean Cottage, Lockerbie and that
the said John Henry Lummis is a (5) Person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
He is absolutely incoherent in Speech, thinks that he is in
Birmingham. He is restless, irritable & obdurate. He
is constantly talking nonsense and is quite irresponsible
for his actions.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Robert Scott his attendant informs me that he
comes furious unless he gets every thing his
own way & attempts to strike.

Name and Medical Designation, J. Bell M.B. C.M.

Place of Abode, Lockerbie.

DATED this Second — day of October — One thousand ~~eight~~ hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Macfadzean
being a (2) Bachelor of Medicine & Master of Surgery
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Whatlethills
Lockerbie in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) John Henry Lummis, Clergyman
Hazeldean Cottage, Lockerbie and that
the said John Henry Lummis is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He seemed very
restless & at a loss to know where he was. I could
get no coherent statement from him & may there
is to him a blank.
Mrs Black told me privately in case she might not
& goes on by this train very regularly. She might not take
things well. He seemed to be better on the Sunday &
about the time taking to many times he made

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, James Macfadzean M.B.

Place of Abode Lockerbie

DATED this 2? — day of Oct. — One thousand ~~eight~~ hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, J. Bell. being (1) Bachelor of Medicine & Master in Surgery hereby certify, on soul and conscience, that I have this day, at (2) Hazeldean Cottage Locharbie in the County of Dumfries, seen and personally examined John Henry Lummis, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

J. J. Bell M.B. C.M.

DATED this 2nd day of October One thousand ~~eight~~ nine hundred and two years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Sampson (3) Sheriff-Substitute of the ~~(4)~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) Mary Edgar or Lummis, Hazeldean Cottage, Locharbie, Certificates under the hands of J. J. Bell and James Maclachlan, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) John Henry Lummis, Hazeldean Cottage, Lockerbie (Wife of Husband) and that the said John Henry Lummis is a (7) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Henry Lummis as a Patient into the (8) Public Asylum of ~~Crichton Royal Institution~~, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Henry Lummis, which accompanied the said Petition.

DATED this 3rd day of October One thousand ~~eight~~ nine hundred and two years.

Geo: Sampson

To the Superintendent of the (9) Public, *Asylum of* Crichton Royal Institution, Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8949

John Henry Summers.

Adm: 3 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries *of* Galloway, — *and his Substitutes,* — at Dumfries:

The Petition of Mrs. Harriet M. Perry. Seaview, Holywood, Co. Down:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Maud Emmeline Perry, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) daughter, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Maud Emmeline Perry, to the Crichton Royal Institution and to sanction Her admission into the said Asylum.

(To be signed by the Party applying) Harriet M. Perry

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fourth (4) day of October, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Maud Emmeline Perry.
2. Sex and Age,	Female. 24 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	School Teacher.
5. Religious Persuasion, so far as known,	Church of Ireland.
6. Previous Place of Abode,	Seaview, Holywood. Co Down.
7. Place where Found and Examined,	Dumfries.
8. Length of time Insane,	One month.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	24 years.
11. When and where previously under Examination and Treatment (5)	Never.
12. Duration of Existing Attack,	One month.
13. Supposed Cause,	Overwork.
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	—
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs. Harriet M. Perry. Seaview. Holywood. Co Down. (Mother)
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approval, and where. If previously under Treatment, or treatment unknown, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Third day of October, One thousand nine hundred and two Years

(To be signed by the party applying) Harriet M. Perry

P. P.

& A. C.—March 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Peter Murray Kerr
being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh,
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) 12 Sloke Street, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Maud Emmeline Perry, School Teacher from Seaview, Holywood, Co. Down, and that the said Maud Emmeline Perry, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her insane appearance and manner. She is very excited and does not seem to understand what is said to her. Takes no interest in herself or her surroundings. She is very depressed and refuses to take food.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M.

Place of Abode, 20 Castle Street Dumfries

Dated this third day of October, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Keay,
being a (1) Fellow of the Royal College of Physicians,
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Maud Emmeline Perry, School Teacher, from Seaview, Holywood, Co. Down, and that the said Maud Emmeline Perry, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her appearance and manner are those of a person suffering from depression of mind. She looks miserably unhappy. She is with difficulty induced to answer the simplest question. She is unable to tell me the day of the week, or say where she came from. She has no idea as to how old she is. She refuses to take food.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Keay M.D. F.R.C.P.

Place of Abode, District Asylum, Inverness

Dated this third day of October, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Murray Kerr, ——— being (1) Graduate of Medicine ——— hereby certify, on soul and conscience, that I have this day, at (2) 12 Globe Road Dumfries, in the County of Dumfries —, seen and personally examined Maud Emmeline Perry, ——, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Peter Murray Kerr.

DATED this third day of October, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Maud Emmeline Perry. to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother

Signature and Address Harriet M. Perry

Date 3rd October 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of (1) Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (2) Mrs Harriet M. Perry, Seaview, Holywood, Co: Down, Certificates under the hands of Peter Murray Kerr, and John Keary, ——— being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Maud Emmeline Perry, Seaview, Holywood, Co: Down, and that the said Maud Emmeline Perry is a (4) person of unsound mind, ——— and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Maud Emmeline Perry, as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Maud Emmeline Perry, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fourth day of October One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo: Campion

No. 8950.

Maud Emmeline Perry.

Adm: 3 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes, at* Dumfries :—

The Petition of Henry Rowland Ellison Grey, 14 Esplanade Gardens, Scarborough, —

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Katherine Mary Grey, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) daughter — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Katherine Mary Grey, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) H R E Grey

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eighth (4) day of October, — One thousand nine hundred and two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length, ... Katherine Mary Grey.
2. Sex and Age, . Female - 24 years -
3. Married, Single, or Widowed, . Single.
4. Condition of Life, and previous Occupation (if any), ... No occupation -
5. Religious Persuasion, so far as known, . Church of England -
6. Previous Place of Abode, . Scarborough -
7. Place where Found and Examined, . Bethlem Royal Hospital.
8. Length of time Insane, . Three years.
9. Whether First Attack, . Yes.
10. Age (if known) on First Attack, 24 years.
11. When and where previously under Examination and Treatment (5) . The Retreat, York 1899, to 1901 Bethlem Royal Hospital March 1902
12. Duration of Existing Attack, Six months.
13. Supposed Cause, . Hysteria induced by over exertion.
14. Whether subject to Epilepsy, . No -
15. Whether Suicidal, . . No -
16. Whether Dangerous to others, No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable, . . . Born at Southsea Hants. Resident of Scarborough ..
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane, ... Henry R. E. Grey Captain R.N. 17 Esplanade Gardens. Scarborough - (father). Two aunts suffered from religious mania.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,

(5) If patient has previously in an Asylum, state result of latest admission or approximate date thereof. If previously under Treatment or Treatment as an out fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventh day of October, — One thousand nine hundred and two years. (*To be signed by the party applying*) H R E Grey

P. P.

& A. C.—March 1902.

CX 8950

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Theophilus Buckeley Hyslop, being a (1) Doctor of Medicine of the University of Edin and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) Bethlem Royal Hospital, S.E. in the County of City of London separately from any other Medical Practitioner visited and personally examined (4) Katherine Mary Grey of Bethlem Royal Hospital, London, S.E. and that the said Katherine Mary Grey is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is suffering from acute mania with confusion of ideas, inability to give a rational account of herself untidiness in dress & habits, & failure to occupy herself or take any interest in a

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Eliza Diamond Nurse at Bethlem Royal Hospital London S.E. states that patient is excited, do nothing for herself, & uses bad language

Name and Medical Designation, Theo. B. Hyslop M.D.

Place of Abode, Bethlem Royal Hospital S.E.

DATED this 6th day of October, One thousand nine hundred and two Years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Peter Murray Kerr, being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution, Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Katherine Mary Grey Bethlem Royal Hospital London S.E. and that the said Katherine Mary Grey is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her insane appearance and manner She is confused. Has no idea where is or what day of the week it is. Is very facile. Takes no interest in anything.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M.

Place of Abode, 20 Castle Street Dumf

DATED this eighth day of October, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Theophilus Bulkeley Heyslop, being (1) Doctor of Medicine of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Bethlem Royal Hospital S.E. in the County of ~~Middlesex~~ London, seen and personally examined Katherine Mary Grey, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries;

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of residence.

(3) State place at which Asylum is situated.

Theo. B. Heyslop M.D.

DATED this 6th day of October 1902.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Katherine Mary Grey to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address H R B Grey X Sign Rae

Date 9th October 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Advocate, (1) Sheriff Substitute of ~~the~~ (2) Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (3) Henry Rowland Ellison Grey 17 Esplanade Gardens Scarborough, Certificates under the hands of Theophilus Bulkeley Heyslop and Peter Murray Rees being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Katherine Mary Grey, Bethlem Royal Hospital, London, and that the said Katherine Mary Grey, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE YOU to receive the said Katherine Mary Grey as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Katherine Mary Grey, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot or a Person of

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Ninth day of October, One thousand nine hundred and two years.

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] John Clerk

No. 8951

Katherine Mary Grey.

Adm: 4 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of Dumfries and Galloway, and his Substitutes,—

The Petition of Charles Breckenridge Inspector of Poor of the Parish of Penninghame

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Lemma Scott

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Lemma Scott to the Royal Asylum at Dumfries and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Charles Breckenridge

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 6th (4) day of October One thousand eight hundred and Two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Lemma Scott
2. Sex and Age,	Female, 62 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Cab door worker
5. Religious Persuasion, so far as known,	Prot.
6. Previous Place of Abode,	Newton Stewart
7. Place where Found and Examined,	Wigtownshire Poorhouse Stranraer
8. Length of time Insane,	Nine years
9. Whether First Attack,	Third
10. Age (if known) on First Attack,	39
11. When and where previously under Examination and Treatment (1).	at present in lunatic wards of Combination Poorhouse Stranraer previously in Dumfries Asylum
12. Duration of Existing Attack,	9 years
13. Supposed Cause,	no
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Penninghame
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	No known relatives
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	no
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(1) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under observation or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 6th day of October One thousand nine hundred and two

(To be signed by the party applying) C Breckenridge

T. & A. C.—June 1896. P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Alexander Anderson, being a (1) Doctr of medicine of Glasgow University and being in actual practice as a (2) physician & surgeon do hereby certify, on soul and conscience, that I have this day, at (3) the Wigtown Poorhouse Dalrymple St., Stranraer, in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Jemima Scott, late attendant an inmate of the Wigtownshire Poorhouse and a pauper and that the said Jemima Scott is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

1. She is irrelevant in speech. 2. She is suffering from delusions e.g. that she is being chased a mad dog and that she should be drowned.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Miss Allshorn, Female Attendant in above Poorhouse corroborates the above statement in regard to the [illegible] of delusions.

Name and Medical Designation, J. A. Anderson M.

Place of Abode, 21 Lewis St. Stranraer

DATED this Sixth day of October One thousand ~~eight~~ nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, David D.K. Munro being a (1) Bachelor Medicine and master Surgery of Aberdeen University and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) The Combination Poorhouse Stranraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Jemima Scott. — Pauper. and that the said Jemima Scott is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her talk is incoherent; she said she was a dog should be drowned.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

The matron informs me she suffers from delusions: and at times is noisy and troublesome & would strike other inmates

Name and Medical Designation, D. D.K. Munro M.B.

Place of Abode 17 Lewis St Stranraer

DATED this 6th day of October One thousand ~~eight~~ nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Allan Thomas Watson Esquire Honorary Sheriff Substitute
of the (1) Sheriffdom of Dumfries and Galloway
having had produced to me, with a Petition at the instance of (2) Charles Brockbridge Inspector of Poor of the Parish of Terregles
Certificates under the hands of John Alexander Anderson M.D.
and David Duke Munro M.B. C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Lemuna Scott, pauper, and that the said Lemuna Scott is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Lemuna Scott as a Patient into the (6) Royal Asylum of Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Lemuna Scott which accompanied the said Petition.

DATED [at Stranraer] this sixth day of October One thousand ~~eight~~ nine hundred and two

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

To the Superintendent of the (7)
Royal *Asylum of* Dumfries

(7) Public, District, Parochial, or Private.

[*Signature*] Allan T. Watson

No. 8952

Semina Scott.

(Semingham)

Adm. 4 October 1902.

~~Glasgow Royal Asylum, Gartnavel.~~

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, ——*and his Substitutes,*— at Dumfries:

The Petition of Wm. J. Templeton, ——— residing at 203 West George Street Glasgow:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Kittie Templeton, ——— your Petitioner's (3) niece, ——— residing at Glenhervie Prestwick, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Kittie Templeton, ——— to the ~~Gartnavel~~ Royal Asylum at ~~Gartnavel~~ Dumfries, and to sanction her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Wm. J. Templeton

Dated this Ninth — (4) day of October, — One thousand nine hundred and two years.

(4) The date of the petition must be within fourteen clear days ~~eight~~ following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Kittie Templeton.
2. Sex and Age,	female - 35.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	no occupation young lady.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Prestwick.
7. Place where Found and Examined,	203 West George St: Glasgow.
8. Length of time Insane,	about three months
9. Whether First Attack,	first distinct attack.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment,	at home.
12. Duration of Existing Attack,	three weeks.
13. Supposed Cause,	natural nervousness with perhaps suspicion of alcohol.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	private Patient
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wm J Templeton - uncle - 203 West George Street Glasgow.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	nil.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Wm J Templeton

Dated this 8th day of October — One thousand eight hundred and ~~nine~~ two P.P. years.

* To be signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alex: Robertson
being a (1) Graduate in medicine of Glas
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 203
West George St. Glasgow, in the County o
Lanark, separately from any other Medical Practitioner
visited and personally examined (4) Kitty Templeton Spin
residing at Hawkenwye, Prestwick and tha
the said Kitty Templeton, is a(n) Insane pe
and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Patient thinks
her dead mothers Spirit came and spoke to h
and that her late aunts Spirit commanded her to
Manchester and come to Glasgow: is excited and diffi
to control. Fancies that her nearest relatives are
against her: is unsafe to be at large

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
She has been quite uncontrol
during each paroxysm has made dangerou
threats. Information from her relatives

Name and Medical Designation, Alex. Robertson

Place of Abode, 11 Woodside Crescent,

DATED this 8th day of October, One thousand eight
nine hundred and 2.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, James Ross Walk
being a (1) Graduate in Medicine of Glasgow,
and being in actual practice as a (2) Physician in Ayr
do hereby certify, on soul and conscience, that I have this day, at (3) 203 West
George St. Glasgow, in the County of
Lanark, separately from any other Medical Practitioner,
visited and personally examined (4) Miss Kitty Templeton, Spin
residing at Hawkenwye, Prestwick, and that
the said Kitty Templeton, is a (5) person of
unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) have known her
a person with unstable nervous system for some
lately is under the delusions that all he
are against her; restless, sleepless, vulgar
violent maniacal or uncontrollable temper

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Uncle finds her guilty of getting in to o
friend's house by window - breaking
if necessary: Cousin says the threatens
if controlled or thwarted in her designs for

Name and Medical Designation, J. Ross Walk, M.B.

Place of Abode Annisfield, Ayr

DATED this Eighth day of October, One thousand eight
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alex. Robertson being (1) a Graduate in medicine of Glasgow, hereby certify, on soul and conscience, that I have this day, at (2) 203 West George St. Glasgow, in the County of Lanark, seen and personally examined Kittie Templeton, and that the said person is of unsound mind, & a proper Patient to be placed in an Asylum.

(1) State qualification.
(2) State place of examination.

And I further certify that the case of the said person is one of Emergency.

Alex. Robertson. M.D.

DATED this 8th day of October, One thousand ~~eight~~ nine hundred and 7.

(The following should be filled up whenever a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the ~~GLASGOW~~ ROYAL ASYLUM to receive therein Kittie Templeton Crichton to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Uncle

Signature and Address Wm. J. Templeton

Date 8th October 1907.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary, (1) Sheriff-Substitute, of the ~~Sheriffdom~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) William J. Templeton, 203 West George street, Glasgow, Certificates under the hands of Alex. Robertson, and James Ross Watt, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Kittie Templeton, Glenhenwyn, Prestwick, (Petitioner's niece), and that the said Kittie Templeton, is an (4) insane person, a person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Kittie Templeton ~~Carlerton~~ Dumfries as a Patient into the ~~GLASGOW~~ ROYAL ASYLUM AT ~~GARTNAVEL~~ Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Kittie Templeton, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Ninth day of October, One thousand ~~eight~~ nine hundred and two years. Four printed words deleted.

John Clerk

To the Superintendent of the Public ~~Glasgow Royal Asylum, Gartnavel~~ Crichton Royal Institution Dumfries.

No. 8953.
Kittie Templeton
Adm: 8 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of the (2) Dumfries and Galloway and his Substitutes, — at Dumfries

The Petition of Thomas Nisbet, 31 West Road Irvine

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Berry or Nisbet your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Berry or Nisbet to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Thomas Nisbet

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 15th — (4) day of October — One thousand nine hundred and five.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Berry or Nisbet
2. Sex and Age,	Female 40
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Housewife —
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	31 West Road Irvine
7. Place where Found and Examined,	31 West Road Irvine
8. Length of time Insane,	Three months —
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Three months
13. Supposed Cause,	Childbirth
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	Yes —
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Nisbet 31 West Road Irvine Husband Insanity on Mothers Side of family
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an asylum, state name and date of latest admission or approximate date thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fourteenth day of October One thousand nine hundred and two.

(To be signed by the party applying) Thomas Nisbet

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the Information, and from whom derived.*

I, the undersigned, William Wilson Doctor of Medicine being a (1) Graduate of the University of Glasgow and being in actual practice as a (2) Physician and Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 31 West Road Irvine Ayr in the County of separately from any other Medical Practitioner visited and personally examined (4) Mary Berry or Nisbet and the said Mary Berry or Nisbet is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Dull and morose at times highly excited. States there is a great depression on her mind and that in naming her visits to the clergymen she has committed a sin which will cause her to commit suicide. Rambling and incoherent in her conversation

2. Other facts (if any) indicating Insanity communicated to me by others: (7) States almost none at night is becomes violently insane & soldiers and policemen watching his house under them all — has been found in his room at suicide

From husband who is married &c

Name and Medical Designation, William Wilson MB

Place of Abode, Redburn — Irvine

DATED this fourteenth day of October One thousand nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the Information, and from whom derived.*

I, the undersigned, William Adam Paterson being a (1) Graduate in medicine of Glasgow and being in actual practice as a (2) physician do hereby certify, on soul and conscience, that I have this day, at (3) 31 West Road Irvine Ayr in the County of separately from any other Medical Practitioner visited and personally examined (4) Mary Berry or Nisbet and the said Mary Berry or Nisbet is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her attitude & manner are indicative of great mental depression. She states that she has disgraced certain parties by naming her child after them, that her child is unworthy & that Soldiers are searching the town for her in order to kill her & that therefor she must hide herself. — She is sleepless & refuses food without the help of her mother & since the onset of her present condition she has developed a tendency to take stimulants in excess, had she been able to do so. She threatens suicide. Her husband Thomas Nisbet informs me he has found her attempting to drown herself.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

From husband

Name and Medical Designation, Wm Paterson MB CM

Place of Abode, Waterside Irvine

DATED this fourteenth day of October One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, William Adgen Paterson being (1) Graduate of Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) 21 West Rd Annan seen and personally examined in the County of Ayr Mary Berry or Nisbet, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

Wm. A. Paterson M.B.C.M.

DATED this fourteenth day of October One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Mary Berry or Nisbet to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband

Signature and Address Thomas Nisbet

Date 14. October 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire, Advocate Sheriff Substitute of the (3) Dumfries and Galloway at Dumfries. having had produced to me, with a Petition at the instance of (4) Thomas Nisbet, 21 West Road, Irvine Certificates under the hands of William Wilson and W. A. Paterson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Mary Berry or Nisbet, 21 West Road, Irvine Return Wife and that the said Mary Berry or Nisbet is a (6) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Berry or Nisbet as a Patient into the (7) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Berry or Nisbet which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(5) Describe him, and if a Pauper, state so.

(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(7) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Seventeenth day of October One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

No. 8954.

Mary Betty or Nisbet

Adm: 15 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of Dumfries and Galloway — and his Substitutes, — of Dumfries.

The Petition of James Menzies Austin, High Street Dalbeattie, Inspector of Poor of the Parish of Urr;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Eleazor Heughan, your Petitioner's (2) pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Eleazor Heughan to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) J. M. Austin.

(3) The date of the Petition must be within fourteen clear days ~~eight~~ next following the dates of the Medical Certificates.

DATED this fifteenth (3) day of October, One thousand ~~eight~~ nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Eleazor Heughan.
2. Sex and Age,	Male. 66 years.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Joiner.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Union St. Dalbeattie.
7. Place where Found and Examined,	Dumfries Infirmary.
8. Length of time Insane,	5 weeks.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	✓
11. When and where previously under Examination and Treatment (3)	✓
12. Duration of Existing Attack,	about 5 weeks.
13. Supposed Cause,	Result of an accident 5 weeks ago.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	no
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Urr
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Robert Heughan and Jane Heughan both a Union St Dalbeattie a son and daughter. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(3) If patient has previously been in an Asylum, state date of latest admission or approximate thereto. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fifteenth day of October One thousand ~~eight~~ nine hundred and two

(*To be signed by the party applying*) J. M. Austin.

MEDICAL CERTIFICATE, No I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Archibald David Gillespie being a (1) Bachelor of Medicine & Master in Surgery Univ of Edinburgh and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Royal Dy Dumfries in the County of Dumfriesshire separately from any other Medical Practitioner, visited and personally examined (4) Eleazer Heughan (at Balbeattie) and that the said Eleazer Heughan is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Does not know his own son — does not know he is in hospital — takes no interest in his surroundings — has delusions — excitable at times looks quite mentally afflicted. This dates from his accident

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Home surgeon & matron. He is violent in ward at night annoys the other patients. Thinks his medicine is poison. In various ways mentally afflicted

Name and Medical Designation, J. D. Gillespie MB

Place of Abode, Alma Dalbeattie

DATED this fifteenth day of October One thousand eight hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Clark Gilchrist being a (1) Bachelor of Medicine and Bachelor of Surgery - Edinburgh University and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) Dumfries and Galloway Royal Infirmary in the County of Dumfriesshire separately from any other Medical Practitioner, visited and personally examined (4) Eleazer Heughan 20 Months Balbeattie and that the said Eleazer Heughan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
This is walk about ward with night shirt on. and obstinately resists when attempting to remove him - His manner very that he would like a walk outside. - Drank to excess in early part of life and said it was gay strong whisky

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Delusions at night. turns on all the gases and takes out the patients - behaves in an insane way. Drank some laudanum recently.

Name and Medical Designation, James C. Gilchrist MB Ch

Place of Abode Dumfries & Galloway Royal Infirmary

DATED this fifteenth day of October One thousand eight hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Charles Gilchrist
being (1) Registered Medical Practitioner & Registered Physician, Univ. of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Dalbeattie Police Station
in the County of Dumfriesshire, seen and personally examined Eleazor Heughan, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution Dumfries

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

James C. Gilchrist M.B. C.M.

DATED this Fifteenth day of October One thousand ~~eight~~ nine hundred and two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution, Dumfries ~~Asylum~~ to receive therein Eleazor Heughan to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address W. Austin.

Date 15 Oct 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of ~~the~~ (1) Dumfries and Galloway at Dumfries — having had produced to me, with a Petition at the instance of (2) James Menzies Austen, Inspector of Poor, Ure Dalbeattie Certificates under the hands of Samuel Archibald David Gillespie and James C. Gilchrist — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) — Eleazor Heughan, 20 Union Street, Dalbeattie (a pauper) and that the said Eleazor Heughan is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Eleazor Heughan as a Patient into the (5) Public — Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Eleazor Heughan, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Seventeenth day of October One thousand ~~eight hundred and~~ nine hundred and two years.
Four words deleted

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8955

Eleanor Heughan
(wife)

Adm: 15 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries and Galloway *and his Substitutes,—*

The Petition of John Hutchison, farmer Low Drummore, Kirkmaiden, Wigtownshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Hutchison your Petitioner's (3) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Hutchison to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) John Hutchison

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fourteenth (4) day of October One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jane Hutchison
2. Sex and Age,	49 years female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Stranraer
7. Place where Found and Examined,	Do.
8. Length of time Insane,	Has been failing for some months
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	Religious mania
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Not known
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Hutchison Farmer Low Drummore by Stranraer
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If not previously under Examination or Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fourteenth day of October One thousand nine hundred and two.

(*To be signed by the party applying*) John Hutchison

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Alexander Anderson being a (1) Doctor of the Medicine of Glasgow University and being in actual practice as a (2) Physician and Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 63 Dalry Street Stranraer, in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Jane Hutchison, Spinster, 63 Dalrymple Street, Stranraer and that the said Jane Hutchison is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

1. Dull and somewhat vacant facial expression. 2. Has tried keeping lodgers in several towns but has given up on each occasion, fancying she would be better if she were at something else. 3. Generally is mentally very unstable, and discontented. 4. At present much

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mary Hutchison, her sister who lives with her, states that she is at times restless, cannot "settle", and is always desiring some new change of occupation. She has never been able to stick to anything: (2) She went to London recently, telling her friends and without notice, in pursuance of this journey at 10 p.m. She has threatened to do away with herself.

Name and Medical Designation, J. A. Anderson M.B.

Place of Abode, 21 Lewis St. Stranraer

DATED this thirteenth day of October One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Thomas Harper being a (1) Bachelor of Medicine & Master of Surgery of the University and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 63 Dalrymple Street Stranraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Jane Hutchison and that the said Jane Hutchison is a (5) person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) (1) Keeps on talking about some change of occupations and that she be cure of she could obtain a farm. (2) Is much depressed and has a vacant expression (3) Her mental emotions is very unstable.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) (1) Mary Hutchison her sister who has lived with Jane informs me her continual talk is to have some change of occupation (2) It is at times rhyme in (3) Has She has threatened on several occasions to commit

Name and Medical Designation, Thomas Harper M.B. C.M.

Place of Abode, Harper House Stranraer

DATED this thirteenth day of October One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Allan Thomson Watson Esquire (1) Honorary Sheriff Substitute of the (2) Sheriffdom of Dumfries & Galloway having had produced to me, with a Petition at the instance of (3) John Hutchison farmer, Lord Drumsmore Kirkmaiden Wig Wigtownshire, Certificates under the hands of John Alexander Anderson M.B. and Thomas Harper M.B. Ch.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Hutchison Spinster 63 Dalrymple Street Stranraer, and that the said Jane Hutchison is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Hutchison as a Patient into the (6) Crichton Royal ~~Asylum~~ Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Hutchison which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Stranraer] this fourteenth day of October One thousand nine hundred and two. (two printed words deleted)

To the Superintendent of the (7)
Crichton ~~Asylum~~ Royal Institution Dumfries

[Signature] Allan T. Watson

(7) Public, District, Parochial, or Private.

No. 8956.
Jane Hutchison.
Admd: 16 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, of ——— *and his Substitutes,—of* Dumfries.

The Petition of Naylor Smythe, Merchant, of 236 South Norwood Hill, London, S.E. ——

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Kimberley Fuller, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Brother-in-Law. (Wife's Brother) — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Kimberley Fuller, — to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Naylor Smythe

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twentieth (4) day of October, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Kimberley Fuller.
2. Sex and Age,	Male-54 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Merchant.
5. Religious Persuasion, so far as known,	Episcopalian.
6. Previous Place of Abode,	236. South Norwood Hill, London.
7. Place where Found and Examined,	Castle Street & Crichton Royal Institution, Dumfries.
8. Length of time Insane,	10 years.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	44 years.
11. When and where previously under Examination and Treatment (5)	In 1896- Was admitted into Crichton Royal Institution
12. Duration of Existing Attack,	10 years.
13. Supposed Cause,	Syphilis.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Naylor Smythe 236 South Norwood Hill London. (Sister)
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approximate date. If previously under Treatment, or treatment unknown, so state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twentieth day of October, One thousand nine hundred and two years.

(*To be signed by the party applying*) Naylor Smythe

& A. C.—March 1902.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Peter Murray Kerr, being a (1) Bachelor of Medicine and Master in Surgery of the University of Edinburgh, and being in actual practice as a (2) General Practitioner, — do hereby certify, on soul and conscience, that I have this day, at (3) 20 Castle Street, Dumfries, — in the County of Dumfries, — separately from any other Medical Practitioner, visited and personally examined (4) William Kimberley Fuller, 236 South Norwood Hill, London, — and that the said William Kimberley Fuller, — is a (5) person of unsound mind, — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

His insane appearance and manner
He is very depressed and miserable
Has no interest in life.
Refuses to take food.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Peter Murray Kerr M

Place of Abode, 20 Castle Street Dumfries

DATED this Eighteenth — day of October, — One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of Glasgow University and Surgeon, Physician and Surgeon, and being in actual practice as a (2) do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, — in the County of Dumfries, — separately from any other Medical Practitioner, visited and personally examined (4) William Kimberley Fuller, Merchant, 236 South Norwood Hill, London, and that the said William Kimberley Fuller, — is a (5) person of unsound mind, — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Looks very depressed: has difficulty in engaging in conversation, and is confused and incoherent in his utterances: says he takes little interest in life and reads very little: has little appetite. And would rather not take food.—

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, 27 Castle St, Dumfries

DATED this Nineteenth day of October — One thousand nine hundred and two years.—

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Peter Murray Kerr, being (1) Graduate in Medicine, hereby certify, on soul and conscience, that I have this day, at (2) 20 Castle Street, in the County of Dumfries, seen and personally examined William Kimberley Fuller, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

P. Murray Kerr.

Dated this eighteenth day of October, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution, Asylum to receive therein William Kimberley Fuller, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother-in-Law.

Signature and Address Naylor Smythe

Date Oct 18th 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of (1) Dumfriesland Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Naylor Smythe Merchant, of 236 South Norwood Hill, London, S. E. Certificates under the hands of Peter Murray Kerr, and Alex: Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) William Kimberley Fuller, 236 South Norwood Hill, London, Petitioner's Brother-in-Law, and that the said William Kimberley Fuller, is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Kimberley Fuller as a Patient into the (5) Public Asylum of Crichton Royal Institution, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Kimberley Fuller, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

Dated [at Dumfries] this Twenty first day of October, One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (1) Public *Asylum of* Crichton Royal Institution, Dumfries.

(1) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8954

William Kimberley Fuller

Adm: 18 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — of the (2) Dumfries and Galloway, and his Substitutes — of Dumfries.

The Petition of Alexander Cuthbertson Cutr. Baker, New Cumnock:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Cuthbertson, Jr. Son,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Cuthbertson Jr. to the Southern Counties Asylum, Dumfries, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Alexander Cuthbertson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 20th (4) day of Oct. — One thousand nine hundred & two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Alexander Cuthbertson, Jr.
2. Sex and Age,	male; 29 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Baker.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	New Cumnock.
7. Place where Found and Examined,	New Cumnock.
8. Length of time Insane,	Six weeks.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	29.
11. When and where previously under Examination and Treatment (5)	No.
12. Duration of Existing Attack,	Six weeks.
13. Supposed Cause,	None.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Shown signs lately.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Cuthbertson New Cumnock. Father.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state name of latest Asylum, and approximate date thereto. If previously under Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 20th day of Oct. — One thousand nine hundred & two

(*To be signed by the party applying*) Alexander Cuthbertson

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George Hanson
being a (1) Bachelor of Medicine & Master in Surgery (Edin.
and being in actual practice as a (2) Physician & Surgeon;
do hereby certify, on soul and conscience, that I have this day, at (3) Castle
New Cumnock, in the County of
Ayr, separately from any other Medical Practitioner,
visited and personally examined (4) Alexander Cuthbertson,
Castle, New Cumnock, and that
the said Alexander Cuthbertson, is a (5) person
of unsound mind, and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
At times he is morose & reticent. At other times
talk a great deal. His sentences having no connection
one with the other. People outside and his own self
are telling false hoods about him. They are out up to
Every where he goes, even in Spiritualistic Circles &c he is
the person of ill treating his Sister.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He sleeps badly. Is at times very excited. Has his
an umbrage at his father, brother, & Sister, and he
treated when they are present. He attempted to strike
his father with the poker.

Name and Medical Designation, George Hanson. M.B.C.M.

Place of Abode, New Cumnock

DATED this 20th day of October, One thousand
nine hundred and two years.

MEDICAL CERTIFICATE. No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Richard Cuthbertson Cuthbertson
being a (1) Lic. Royal College of Phys. Edin; and Lic. of Faculty
Phys & Surgeons, Glasgow,
and being in actual practice as a (2) General Medical Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Castle,
New Cumnock, in the County of
Ayr, separately from any other Medical Practitioner,
visited and personally examined (4) Alexander Cuthbertson
and that
the said Alexander Cuthbertson, is a (5) person of
unsound Mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Very morose at
times alternates with outburst of temper. Sleeps
badly and conducts himself in very peculiar
manner.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His father states that he has shown
violence to different members of the family
and talks nonsense regarding his person

Name and Medical Designation, R. C. Cuthbertson

Place of Abode New Cumnock

DATED this twentieth day of October, One thousand
nine hundred & two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Richard Cuthbertson Hutchesson, being (1) M.B. C.M. Royal College of Phys. Edin. Mem. Fac. Phys. & Surg. Glas. hereby certify, on soul and conscience, that I have this day, at (2) New Cumnock in the County of Ayr, seen and personally examined Alexander Cuthbertson Jr. —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

R. C. Hutchesson

DATED this twentieth day of October, — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Alexander Cuthbertson, Jr. — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address Alexander Cuthbertson Castlehill New Cumnock

Date 20th October 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute, of (1) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Alexander Cuthbertson, Senior, Baker, New Cumnock, Certificates under the hands of George Hanson, and R. G. Herbertson — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Cuthbertson, Junior, New Cumnock (Cuthbertson) and that the said Alexander Cuthbertson, Junior, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Cuthbertson, Junior, as a patient into the (6) Public Asylum of Southern Counties, and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Cuthbertson, Junior, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries —] this twenty-first day of October — One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (6) Public *Asylum of* Southern Counties, Dumfries.

[*Signature*] Geo: Campion

No. 8958.

Alexander Cuthbertson.

Adm: 20 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~Dumfries & Galloway~~ Renfrew and his Substitutes at Paisley, Inspector of Poor, Renfrew acting for the Parish Council of Stoneykirk.

The Petition of Matthew Andrew Reynard

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Wilson

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) Parker is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Wilson to the Crichton Royal Institution and to sanction her admission into the said Asylum.

pro petitioners

(*To be signed by the Party applying*) Matthew Andrew Reynard

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twentieth (3) day of October — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Agnes Wilson
2. Sex and Age,	Female aged 70 years.
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	26 Orchard Street, Renfrew
7. Place where Found and Examined,	26 Orchard Street, Renfrew
8. Length of time Insane,	A few days.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	70 years.
11. When and where previously under Examination and Treatment (5)	Never
12. Duration of Existing Attack,	A few days.
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stoneykirk, Stranraer.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Cousin. Jeanie Wilson Alexander 28 Orchard Street, Renfrew.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If Patient has previously in an Asylum, state when last discharged or escaped. If previously under Medical Certificate or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twentieth day of October — One thousand nine hundred and two years.

(*To be signed by the party applying*) Matthew Andrew Reynard P.P.
for Parish Council of Stoneykirk

C. & A. C.—April 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an Insane person, *or* an Idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Hill M. D.
being a (1) Graduate of Glasgow University,
and being in actual practice as a (2) Medical Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) 26 Orchard St. Renfrew, in the County of Renfrew, separately from any other Medical Practitioner visited and personally examined (4) Agnes Wilson, Pauper, and the said Agnes Wilson, is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Tells me there is a man fitting up electrical apperatus all through the house She moves her bed from place to place to get free from the current.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Tells her neighbours there is an electric engine under her bed, and that it work at night.

Name and Medical Designation, James Hill M.

Place of Abode, Renfrew

DATED this 20th day of October, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an Insane person, or an Idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Robert Dunsmuir M.B.C.
being a (1) Graduate of Glasgow Univer
and being in actual practice as a (2) Medical Practitio
do hereby certify, on soul and conscience, that I have this day, at (3) 26 Orchard St. Renfrew, in the County of Renfrew, separately from any other Medical Practitioner visited and personally examined (4) Agnes Wilson, Pauper, and the said Agnes Wilson, is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
She is under the impression all her friends have turned her foes, and try to kill with electricity and c gas.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Alexander her friend for yea says she cannot live in her house electricity and desires to be put out

Name and Medical Designation, Rob. Dunsmuir

Place of Abode, Renfrew

DATED this 20th day of October, One thousand nine hundred and two Years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Hill, M.D.
being (1) Graduate of Glasgow University,
hereby certify, on soul and conscience, that I have this day, at (2) 26 Orchard St.
in the County of Renfrew, , seen and personally examined
Agnes Wilson, , and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

James Hill M.D

DATED this 20th day of October, — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein Agnes Wilson
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Assistant Inspector of Poor pro Parish Council of Stonyhirst

Signature and Address Matthew A. Reynard, Renfrew.

Date 20th October 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute of (1) Dumfries & Galloway at Dumfries.
having had produced to me, with a Petition at the instance of (2) Matthew Andrew Reynard, Assistant Inspector of Poor, ~~Stonyhirst~~ Renfrew
Certificates under the hands of James Hill, M.B. D. and Robert Dinsmuir, M.B. C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Wilson, 26 Orchard Street, Renfrew (Parish) and that the said Agnes Wilson, is a (5) Lunatic,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Wilson as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Wilson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty ~~fourth~~ third day of October One thousand nine hundred and two years. Four words deleted.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8959.

Agnes Wilson.

(Stoneykirk)

Adm. 20 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) County~~ of Dumfries & Galloway, and his Substitutes, at Dumfries;

The Petition of ~~the Parish Council~~ respectfully

Wm. Macdonald, Inspector of Poor for the Parish of Kirkcudbright;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Ewart, Woodcutter, Palnackie,—

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) pauper,

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Samuel Ewart, to the Southern Counties Asylum, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Wm McDonald

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 22nd (4) day of October, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Samuel Ewart.
2. Sex and Age,	Male — 37 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Wood cutter.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Palnackie.
7. Place where Found and Examined,	Kirkcudbright.
8. Length of time Insane,	present.
9. Whether First Attack,	First?
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	Drink?
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	Suicidal.
16. Whether Dangerous to others,	No?
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkcudbright.
18. Date of becoming Chargeable,	22nd October 1902.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	?
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	want of knowledge.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 21st day of October, One thousand nine hundred and two years.

(*To be signed by the party applying*) Wm McDonald

P. p.

MEDICAL CERTIFICATE, No. 1

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Hugh Gillies,
being a (1) Licentiate of Royal College of Physicians of Edin,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) New Abbey,
in the County of Kirkcudbright,
separately from any other Medical Practitioner, visited and personally examined (4) Samuel Ewart, Pauper, Lunatic,
and that the said Samuel Ewart, is a (5) person of unsound mind, and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Accuses himself of committing crimes. Attempt desire to commit suicide by drowning. Hallucinations.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr. McDougall Kennaway states he found him in the water at Shiddanbeck. He was asked him to desist from. Mr. Halliday states that he expressed wish to drown himself & he should wished Mr. Morrison to cut his throat, after which he went into the Pow down.

Name and Medical Designation, Hugh Gillies L.R.C.P.E. & S. Edin.

Place of Abode, New Abbey by Dumfries

DATED this twenty-first day of October, One thousand nine hundred and five.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Robert B. Campbell,
being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries,
in the County of Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Samuel Ewart, wood cutter, Palnackie, a pauper,
and that the said Samuel Ewart, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
He is morbidly reticent & depressed. He labours under the delusion that he is to be hanged. Says he has murdered himself & that he is hunted & tormented by his enemies. He is very violent & suspicious of those about him. He is considerably confused and he has no idea where he is.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Robert B. Campbell M.B.C.M.

Place of Abode Crichton Royal Institution Dumfries

DATED this 22nd day of October, One thousand nine hundred and five.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hugh Gillies,
being (1) a Licentiate of Royal College of Physicians & Surgeons Edin. (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) New Abbey, (2) State place of examination.
in the County of Kirkcudbright, , seen and personally examined
Samuel Ewart, , and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.
He is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Hugh Gillies L.R.C.P. & S.E.

DATED this twenty-first day of October, One thousand ~~eight~~ nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties
Asylum to receive therein Samuel Ewart
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ~~Wm McDonald~~ Inspector of Poor

Signature and Address Wm McDonald, Newabbey

Date 21st October 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute (3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
of ~~the~~ (3) Dumfries and Galloway, at Dumfries
having had produced to me, with a Petition at the instance of (4) William (4) State whether a County or Stewartry.
Mac Donald, Inspector of Poor, New Abbey, (5) Insert Name and Designation.
Certificates under the hands of Hugh Gillies
and Robert B. Lamb, , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) ~~Samuel Ewart~~ (a Pauper) (5) Describe him, and if a Pauper, state so.
Samuel Ewart, Woodcutter, Palnackie, and that the said
Samuel Ewart, is a (6) person of unsound mind, (6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to
receive the said Samuel Ewart, as a Patient into the
(7) Public — Asylum of Southern Counties and I authorize (7) Public, District, Parochial, or Private.
his — Transmission to the said Asylum accordingly; and I transmit you herewith
the said Medical Certificates, and a Statement regarding the said Samuel Ewart
which accompanied the said Petition.

DATED this Twenty fourth day of October, One thousand ~~eight~~ nine hundred and two years. Two words deleted.

Geo. Campion

To the Superintendent of the (7) Public
Asylum of Southern Counties at Dumfries. (7) Public, District, Parochial, or Private.

No. 8960.

Samuel Ewart.

(Newabbey)

Adm: 22 October 1952.

N B —*This Form shall remain in the Keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

[FORM A]

25 and 26 *Vict., Cap.* 54, *Sec.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway and his Substitutes,—

The Petition of MILES M'INNES, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that James Bell your Petitioner's Pauper is at present in a state of Mental Derangement, and a proper Person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Bell to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) Miles Mc Innes

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Seventh (*) day of October One thousand ~~eight~~ nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Bell.
2. Sex and age,	Male, 31
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Nil
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	Crown Close, High St.
7. Place where found and examined,	Do. Do.
8. Length of time Insane,	about a week
9. Whether First Attack,	No
10. Age (if known) on First Attack,	not known
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Crichton Royal Institution 31st January, 1901.
12. Duration of Existing Attack,	not known
13. Supposed Cause,	not known
14. Whether Subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	24th October, 1902.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Catherine Copland Bell, his mother, residing at Crown Close, High St, Dumfries not known
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty fourth — day of October — One thousand ~~eight~~ nine hundred and two years.

(To be signed by the party applying) Miles Mc Innes

CR. 2460.

MEDICAL CERTIFICATE, NO. I.

(*) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the Street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Peter Murray Kerr
being a (*) Registered Medicine and Master in Surgery in the University of Edinburgh
and being in actual practice as a (*) General Practitioner
do hereby certify, on Soul and Conscience, that I have this day, at (*) 20 Castle Street Dumfries
in the County of Dumfries, separately from any other Medical practitioner, visited and personally examined (*) James Bell, Crown Glove Dumfries. Pauper
and that the said James Bell is a (*) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(*) *State the facts.*

1. Facts indicating Insanity observed by myself : (*)
His insane appearance and manner. He is unable to answer any reasonable question. Has delusions of sight & hearing. He hears people crying at

(*) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others : (*)
His mother Katherine Copland or Bell informs me that he is often very violent and has scratched her face.

Name and Medical Designation, Peter Murray Kerr MB

Place of Abode, 20 Castle Street Dumfries

DATED this twenty fourth day of October One thousand eight hundred and one years

---

MEDICAL CERTIFICATE, NO. II.

(*) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(*) Physician or Surgeon, *or otherwise, as the case may be.*

(*) *Insert the Street, and number of the house (if any), or other like particulars.*

(*) *Insert Designation and Residence, and if a Pauper state so.*

(*) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Robert Livingston
being a (*) Bachelor of medicine & Master in Surgery of Edinburgh University
and being in actual practice as a (*) Physician and Surgeon
do hereby certify, on Soul and Conscience, that I have this day, at (*) Crichton Royal Institution Dumfries in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (*) James Bell pauper Crichton Royal Institution
and that the said James Bell is a (*) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(*) *State the facts.*

1. Facts indicating Insanity observed by myself : (*)
His insane appearance and manner. He is quite incapable of answering questions and sits looking vacantly about himself.

(*) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others : (*)

Name and Medical Designation, George R. Livingston MB Edin

Place of Abode, 35 George Street Dumfries

DATED this twenty sixth day of October One thousand nine hundred and five.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Peter Murray Kerr.
being (1) Graduate in Medicine
hereby certify, on Soul and Conscience, that I have this day, at (2) Crown Close
Dumfries
in the County of Dumfries, seen and personally examined
James Bell, and that the said
Person is of unsound mind, and a proper Patient to be placed in an Asylum. *

And I further certify that the case of the said person is one of Emergency.

* and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Peter Murray Kerr

DATED this twenty-fourth day of October One thousand ~~eight~~ nine hundred and two years.

(1) State Medical qualification.
(2) State place of Examination.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I, hereby request the Superintendent of the Crichton Royal Institution at Dumfries to receive therein James Bell
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Miles Mc Innes
28 Queen St Dumfries

Signature and Address,

Date, 24th Oct 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion, Sheriff-Substitute of the ~~Dumfries~~ & Galloway, at Dumfries.—
having had produced to me, with a Petition at the instance of (1) Miles Mc Innes, Inspector of Poor, Dumfries,
Certificates under the hands of Peter Murray Kerr
and George Robert Livingston, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) James Bell, Lunnonlona, High Street, Dumfries. (a pauper)
and that the said James Bell is a (3) person of unsound mind,
and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Bell as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize you to Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said James Bell which accompanied the said Petition.

DATED this Twenty-seventh day of October — One thousand ~~eight hundred and~~ nine hundred and two years.—

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

(1) Insert Name and Designation.
(2) Describe him, and if a Pauper, state so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

No. 8961.

Name James Bell.
(Dumfries)

Date of Admission 24 October 1902.

[Form A.]

55 and 56 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway.

The Petition of ~~Mrs Isabella Johnstone or Johnstone~~ and his Substitutes ~~Agnes Gaskell or Johnstone~~ Spouse of Colin Gaskell and Ecclefechan and Ashby Grange Annan now of Ingleburn Torthorwald Upper ~~The Petition of~~ Spouse Wrahy of Robert Johnstone Merchant Yorkshire Postmaster Annan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Harold Johnstone

State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (1) Son ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Harold Johnstone ——— to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(To be signed by the Party applying) J. A. Johnstone

The date of the Petition must be within fourteen clear days following the dates of the Medical Certificate.

Dated this 24 — (2) day of October — One thousand ~~nine~~ eight hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1 Christian Name and Surname of Patient at length,	Harold Johnstone.
2 Sex and Age,	Male. 20 years
3 Married, Single, or Widowed,	Single
4 Condition of Life, and previous Occupation (if any).	No occupation
5 Religious persuasion, so far as known,	Episcopalian - not confirmed
6 Previous Place of Abode,	Castle Bank Ecclefechan Ashby Grange Annan now at Carnhoelm College Survey Dumfries
7 Place where Found and Examined,	All his life
8 Length of Time Insane,	Infancy
9 Whether First Attack,	Examined by specialist in London nine years ago
10 Age (if known) on First Attack,	All his life
11 When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	No No Occasionally Annan
12 Duration of Existing Attack,	Never Chargeable
13 Supposed Cause,	Mrs Johnstone, Ingleburn. Torthorwald Upper Toorwood - London. Mother
14 Whether subject to Epilepsy,	No
15 Whether Suicidal,	
16 Whether dangerous to others,	
17 Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18 Date of becoming Chargeable,	
19 Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	
20 Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify that to the best of my knowledge, the above particulars are correctly stated.

Dated this 24 day of October One thousand ~~eight~~ nine hundred and two

(To be signed by party applying) J. A. Johnstone

MEDICAL CERTIFICATE No. I.

I, the undersigned Alexander Dick Mackenzie Smith being a (1) Graduate of Edinburgh University and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) King Arms Hotel Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Harold Johnstone occupation Carrickfergus Linen and that the said Harold Johnstone is a (5) Person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

1. Facts indicating Insanity observed by myself: (6) He is vacant and has no reasoning or thinking powers can only talk of the very simplest things

(6) *State the facts.*

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His mother tells me he has been in this condition since birth and has been for 6 years in Carrickfergus Asylum with no improvement

Name and Medical Designation, Place of abode, A. D. Mackenzie Smith M.B. 18 Castle St Dumfries

DATED this 27th day of October One thousand nine ~~eight~~ hundred and two.

MEDICAL CERTIFICATE No. II.

I, the undersigned Walter Duncan Friend being a (1) Bachelor of Medicine & Master in Surgery of the University of Edinburgh and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kings Arms Hotel, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Harold Johnstone and that the said Harold Johnstone is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

1. Facts indicating Insanity observed by myself: (6) He is childish in manner, speech & motion and is unable to reason upon the simple subjects

(6) *State the facts*

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Place of abode, W. D. Friend M.B. Cm. 19 Buccleuch St. Dumfries

DATED this 27th day of October One thousand nine ~~eight~~ hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned Walter Duncan Friend
being (1) Brother fully qualified Medical Man
hereby certify, on soul and conscience, that I have this day, at (2) Kings Arms Hotel, Dumfries
in the County of Dumfries, seen and personally examined Harold Johnstone, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum. And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.

W. D. Friend M.B.C.M.

DATED, this 24th day of October One thousand ~~eight~~ nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Harold Johnstone to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother

Signature and Address, Jr A. Johnstone Inglewood Foxhill Upper Norwood London

Date, 28 October 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire Advocate Sheriff Substitute of ~~the the County of~~ Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (1) Mrs Isabella Aitkinson Galbert Johnstone, Inglewood Foxhill Upper Norwood, London, Certificates under the hands of Alexander Dall M.B. Donald and Walter Duncan Friend, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Harold Johnstone, Carshalton, Surrey, (Peters Row) and that the said Harold Johnstone is a (3) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Harold Johnstone as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize his Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Harold Johnstone which accompanied the said Petition.

(1) Insert Name & Designation

(2) Describe him, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Twenty eighth day of October – One thousand ~~eight~~ nine hundred and two Years. Five words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 8962.

Name, Harold Johnstone.

Date of Admission, 28 October 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Sheriffdom of Dumfries and Galloway *and his Substitutes,*—

The Petition of Andrew Lait Inspector of Poor Parish of Ecclefechan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Lait your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Lait to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) A. W. Baig

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 19th (4) day of October One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Agnes Lait
2. Sex and Age,	Female. 66 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Seamstress.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Straiten Prin Glencaple
7. Place where Found and Examined,	Nightwatchin Dumfries Poorhouse.
8. Length of time Insane,	
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	About 60 years
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution June 15 to Oct 23rd 1896.
12. Duration of Existing Attack,	as above.
13. Supposed Cause,	
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Oddfellow
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Yes
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Yes

(5) If patient has been previously in an Asylum, state the date of latest admission or approximate thereto. If previously under Examination or treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 19th day of Oct One thousand nine hundred and 2

(To be signed by the party applying) A. W. Baig

P p.

T. & A. C.—Feby. 1901.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Alexander Anderson being a (1) Doctor of Medicine of Glasgow Univ and being in actual practice as a (2) Physician Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) The Wigtown Combination Poor House, Strauraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Agnes Tait, pauper, inmate of the said Poor House and that the said Agnes Tait is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

1. She is restless. 2. Her talk is silly. 3. At times she is depressed. 4. She does silly acts as pacing the walls in an erratic fashion. She is suffering

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr Harper, matron of above poorhouse tells that (Agnes Tait) goes on in a silly way, wandering about and singing and laughing

Name and Medical Designation, J. A. Anderson M

Place of Abode, 21 Lewis St. Stranraer

DATED this twenty ninth day of October One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, David Du[illegible] Moore being a (1) Bachelor of medicine & master of surgery of the University and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) The Wigtown Combination Poorhouse Stranraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Agnes Tait Pauper, an inmate of the poorhouse Stranraer and that the said Agnes Tait is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6), She is rambling and talkative; her talk is nonsensical, but appropriate in fine language. She was rambling in about the Church & ministers &c.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr Ormiston the governor tells me she has been wandering about the house in an aimless constant manner & talking in a silly manner

Name and Medical Designation, D. Du[illegible] Moore M.B. C[illegible]

Place of Abode, 17 Lewis St. Stranraer

DATED this twenty ninth day of October One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Cameron Esquire (1) Honorary Sheriff Substitute of the (2) Sheriffdom of Dumfries & Galloway having had produced to me, with a Petition at the instance of (3) Andrew McCaig Inspector of Poor & the Parish of Old Luce Certificates under the hands of John Alexander Anderson M.D. and David Duke Munro M.B. C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) the said Agnes Tait, Pauper and that the said Agnes Tait is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Tait as a patient into the (6) Crichton Royal [Asylum of] Institution of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Tait which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Stranraer] this 29th day of October One thousand nine hundred and two years (this printed words delete)

To the Superintendent of the (7)
Asylum of
Crichton Royal
Institution Dumfries [Signature] John Cameron

(7) Public, District, Parochial, or Private.

No. 8963
Agnes Yaits.
(Old Lues)
Adm: 30 October 1908.

25

APPLICATION TO T
TRANSFER OF A

I the undersigned
being desirous to transfer
at present a Patient in

Cirkhill Royal

beg to submit the subjoine
Medical Certificate with re

STA

1. Christian Name and Su
length,

2. Sex and Age,

3. Married, Single, or Wid

4. Condition of Life, and
(if any),

5. Religious Persuasion, so

6. Parish to which the Lun
Chargeable,

7. Christian Name and S
of Abode of nearest
the Patient, and deg
(if known), and whet
the Family known to
Insane,

I certify that, to the
and I hereby make Applic
Lunacy to the transfer of

(To be signed by

DATED this 28
hundred and Lio

N.B.—The foregoin
follows, are required for
to which the Patient is

T. S. & C.—May 1898.

16,359.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

GENERAL BOARD OF LUNACY SCOTLAND 29 DEC 1897

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I the undersigned George Rorie. Curator bonis to John ~~Macdonald~~ McDonald ~~M~~.
being desirous to transfer the said John ~~Macdonald~~ McDonald
at present a Patient in James Murray's Royal Asylum Perth and (1)
from the said Asylum to the Crichton Royal Institution. Dumfries

(1) If Lunatic is not a Pauper, insert "detained at my instance," or "whose nearest known relative I am." If Lunatic is a Pauper, insert "a Pauper Lunatic of the Parish of which I am Inspector of Poor."

beg to submit the subjoined Statement of Particulars regarding the said patient, and a Medical Certificate with respect to the mental and bodily condition of the said patient:—

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	John ~~Macdonald~~ McDonald ~~M~~.
2. Sex and Age,	Male. 58.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and Previous Occupation (if any),	No occupation.
5. Religious Persuasion, so far as known,	Protestant.
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	
7. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of the Family known to be, or to have been Insane,	James ~~Macdonald~~ McDonald ~~M~~. City mills. Perth. None known.

I certify that, to the best of my knowledge, the above particulars are correctly stated, and I hereby make Application for the authority of the General Board of Commissioners in Lunacy to the transfer of the patient as aforesaid.

(To be signed by the Applicant) George Rorie.

(2) Curator bonis.

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 28th day of October One thousand ~~eight~~ nine hundred and two.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which follows, are required for the information of the Board and of the authorities of the Asylum to which the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Alexander Reid Urquhart

(1) Name Asylum. hereby certify that I have this day at (1) Perth Royal Asylum

personally examined John McDonald who has been a

(2) Insert Date of Admission. Patient in said Asylum since (2) 10 July 1899 and I certify that

(3) Insert "is," or "is not," as the case may be. the said Patient is a person of unsound mind, (3) is not epileptic, (3) is not suicidal,

(3) is dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State. the Patient, that (4) he labours under Chronic mania with many delusions of persecution, in consequence of which he uses disgusting language & occasionally strikes those about him

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5)

it is in indifferent health, having for many years suffered from Cardiac disease & latterly from albuminuria

and that there is nothing in the Mental or Bodily State of the Patient to make removal

to the (1) Dumfries Royal Asylum inadvisable; and

(6) Insert "the following are," or "there are no," as the case may be. I further certify that (6) the following are facts known to me as to the past history of the Patient, bearing upon risk of suicide or danger to others, which I think ought to be brought under the notice of those who are to have charge of the Patient:—

He frustrates post- other persons along walls &c interfering or obstructed sometimes strikes. He is offensive & dirty in his language which is annoying the following patients-

(Name) Urquhart

(Medical Qualification) Md Frcpe

(Date) 28 Dec 1902

8964 John McDonald. Adm. 31 October 1902.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

The foregoing Application having been made to the Board to authorize the transfer

of John McDonald

from Murray's Royal Asylum, Perth

to Crichton Royal Institution Dumfries,

and the Board having considered such Application and the accompanying Medical Certificate, do hereby authorize the transfer, at any time within fourteen days from the date hereof, of the said patient as requested.

W. Keay Secretary.

DATED at Edinburgh, this 29th day of October, One thousand ~~eight~~ nine hundred and two.

Date of Sheriff's Order *[to be inserted at the Office of Board].*

10th July, 1899.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~of the (2) Stewartry~~ of Dumfries & Galloway and his Substitutes — at Dumfries: —

The Petition of Wm McDonald Inspector of poor for the Parish of Newabbey:

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that William Carruthers, your Petitioner's (2) ~~pauper~~ is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Carruthers to the Southern Counties Asylum, and to sanction his admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Wm McDonald

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Nyth — (3) day of November, — One thousand nine hundred and two. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Carruthers.
2. Sex and Age,	Male. about 50 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	an Outdoor worker.
5. Religious Persuasion, so far as known,	His parents were protestant.
6. Previous Place of Abode,	Newabbey.
7. Place where Found and Examined,	Newabbey.
8. Length of time Insane,	all his life.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	From birth.
11. When and where previously under Examination and Treatment (4)	Never under treatment before.
12. Duration of Existing Attack,	From birth.
13. Supposed Cause,	Congenital
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No: if not interfered with.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Wigtown~~ Newabbey in the meantime.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alex: Black. Craigenlae, New Abbey.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(4) Patient has previously in an Asylum, state date of latest admission or approximate date. If previously under treatment or treatment satisfactory.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this first — day of November, — One thousand nine hundred and two years.

(To be signed by the party applying) Wm McDonald

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Hugh Gillis,
being a (1) Licentiate of Royal College of Physicians in Dub.
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) Craigview, Terenure, Kill and Rigs, in the County of separately from any other Medical Practitioner, visited and personally examined (4) William Carruthers, pauper, and that the said William Carruthers, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Incoherency of Ideas, outbursts of unmeaning violence

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

outbursts of violence, by Pat Carruthers.
Suspicion of Cain and of himself.

Name and Medical Designation, Hugh Gillis, L.R.C.P. Ed.

Place of Abode, New Abbey

DATED this first day of November, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Robert B. Campbell,
being a (1) Bachelor of Medicine and master in Surgery of Edinburgh University, Physician
and being in actual practice as a (2)
do hereby certify on soul and conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) William Carruthers, of the Parish of New Abbey, (a pauper) and that the said William Carruthers, is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

He is much befuddled mentally. He cannot converse sensibly and answers questions in a inconsequent fashion. He has no idea where he is or how he came from.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr McDonald Inspector of Poor. New Abbey informed me that he has been weakminded from birth that he is unable to look after himself & others to respond at times.

Name and Medical Designation, Robt B. Campbell. M.B.

Place of Abode, Crichton Royal Institution Dumfries

DATED this first day of November, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hugh Gillies,
being (1) Licentiate of Royal College of Physicians in Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Mrs. Abbey
in the County of Kirkcudbright, seen and personally examined
William Carruthers,
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Hugh Gillies, L.R.C.P. Ed.

DATED this first day of November, One thousand nine hundred and five.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein William Carruthers to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Wm McDonald, Newabbey

Date November 1st 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (1) Sheriff-Substitute, of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) William Mc Donald, Inspector of Poor, Newabbey, Certificates under the hands of Hugh Gillies, and Robert B. Campbell, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) him and that the said Carruthers, Craigieside, Newabbey (a pauper), William Carruthers, is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Carruthers as a Patient into the (5) Public Asylum of Southern Counties, at Dumfries, and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Carruthers, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Third day of November, One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Southern Counties Dumfries.

[Signature] John Clerk

(5) Public, District, Parochial, or Private.

No. 8965

William Carruthers.
(Kirkbean)

Adm: 1 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) County~~ of Dumfries & Galloway — and his Substitutes, — at Dumfries:

The Petition of Wm. McDonald, Inspector of Poor for the Parish of Newabbey,—

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Martha Carruthers, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Martha Carruthers — to the Southern Counties Asylum, — and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Wm. McDonald

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eight (4) day of November, One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Martha Carruthers.
2. Sex and Age,	Female, about 52 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	An Outdoor worker.
5. Religious Persuasion, so far as known,	Her parents were Protestant.
6. Previous Place of Abode,	Newabbay.
7. Place where Found and Examined,	Newabbay.
8. Length of time Insane,	all her life
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	From birth
11. When and where previously under Examination and Treatment (5)	Never under treatment before.
12. Duration of Existing Attack,	From birth.
13. Supposed Cause,	Congenital.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	(Dryfesdale) Newabbey meantime.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Black, Craigieside, Newabbay.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If Patient has previously in an Asylum, state date of latest Order or Certificate thereto. If previously under Treatment or Treatment elsewhere, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this first — day of November, — One thousand nine hundred and two years.

(*To be signed by the party applying*) Wm. McDonald

No. 2965

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Hugh Gillies,
being a (1) Licentiate of Royal College of Physicians in Edinburgh,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) Craigmuir, New Abbey, in the County of Kirkcudbright, separately from any other Medical Practitioner visited and personally examined (4) Martha Carruthers, pauper, and that the said Martha Carruthers is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Incoherency of Ideas.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

By Kate Carruthers. Impression of case of Insanity. Incoherency of Ideas.

Name and Medical Designation, Hugh Gillies L.R.C.P. Ed.

Place of Abode, New Abbey.

DATED this first day of November One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Robert B. Campbell,
being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh, University,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner visited and personally examined (4) Martha Carruthers, Asylum Worker, Inpatient, (a pauper) and that the said Martha Carruthers is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

She is much infirm mentally. She is unable to answer simple questions. Laughs in a meaningless way when spoken to. She knows where she is and cannot tell me her age. She is of the weak or feeble type.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr McDonald. Inspector of Poor. New Abbey informed me that she has been weak minded from birth. Unable to attend to herself or look after herself.

Name and Medical Designation, Robert B. Campbell. M.B.

Place of Abode, Crichton Royal Institution. Dumfries

DATED this first day of November One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hugh Gillies, being (1) Licentiate of Royal College of Physicians, Edin., hereby certify, on soul and conscience, that I have this day, at (2) New Abbey in the County of Kirkcudbright, seen and personally examined Martha Carruthers, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Hugh Gillies, New Abbey.

DATED this 31st day of November, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Martha Carruthers, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Wm McDonald, Newabbey

Date November 1st 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary (4) Sheriff Substitute of the (5) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (6) William McDonald, Inspector of Poor, Newabbey, Certificates under the hands of Hugh Gillies, and Robert B. Campbell, M.B., being two Medical Persons duly qualified in terms of an Act intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (7) Martha Carruthers, Braicside, Newabbey, (a pauper) and that the said Martha Carruthers, is a (8) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Martha Carruthers as a Patient into the (9) Public Asylum of Southern Counties at Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Martha Carruthers, which accompanied the said Petition.

(4) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(5) State whether a County or Stewartry.
(6) Insert Name and Designation.
(7) Describe him, and if a Pauper, state so.
(8) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(9) Public, District, Parochial, or Private.

DATED [at Dumfries,] this 3rd day of November, One thousand nine hundred and two years.

To the Superintendent of the (9) Public Asylum of Southern Counties at Dumfries.

[Signature] Jno Clerk

(9) Public, District, Parochial, or Private.

No. 8966.

Martha Carruthers.
(Dryfesdale)

Adm: 1 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the Counties~~ of Dumfries & Galloway, and his Substitutes ~~at~~ Dumfries.

The Petition of Wm. McDonald. Inspector of Poor, for the parish of Newabbey.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Carruthers, ~~pauper~~ your Petitioner's (2) pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Carruthers to the Southern Counties Asylum, and to sanction her admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Wm McDonald

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this first (3) day of November, One thousand nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Carruthers.
2. Sex and Age,	Female. about 48 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	an Outdoor worker.
5. Religious Persuasion, so far as known,	Her parents were Protestant.
6. Previous Place of Abode,	Newabbey.
7. Place where Found and Examined,	Newabbey.
8. Length of time Insane,	all her life.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	From birth.
11. When and where previously under Examination and Treatment (3)	Has been under treatment before.
12. Duration of Existing Attack,	From birth
13. Supposed Cause,	Congenital.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Newabbey in the meantime.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alex Black, Craigieside, Newabbey.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(3) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this first day of November, One thousand nine hundred and two years.

(To be signed by the party applying) Wm McDonald

80 2166

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Hugh Gillies,
being a (1) Licentiate of Royal College of Physicians in Edinburgh,
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Craigcrook, New Abbey, in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Mary Carruthers, pauper,
and that the said Mary Carruthers, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Incoherency of Ideas. Inability to attend to or look after herself. Unreasoning fear of Strangers Untidy & violence.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

By Kate Carruthers – Outbursts of violence Inability to look after or take care of self.

Name and Medical Designation, Hugh Gillies, L.R.C.P.Ed.

Place of Abode, New Abbey

DATED this first day of November, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Robert B. Campbell,
being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution, Dumfries, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Carruthers, at present residing Nuabby, a pauper,
and that the said Mary Carruthers, is a (5) person of Unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

She is much enfeebled mentally: Smiles in a vacant way when spoken to – Gives meaningless answers to all questions. She does not know where she is or how she came from. Cannot tell me the day of the week or the present year. She is unable to converse.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr. Macdonald Inspector of Poor, Nuabby tells me she has been weakminded from birth. Has she cannot take herself & that at times she is homicidal.

Name and Medical Designation, Robt B. Campbell. M.B.C.M.

Place of Abode, Crichton Royal Institution, Dumfries

DATED this first day of November One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Hugh Gillies, being (1) Licentiate of Royal College of Physicians in Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) New Abbey, in the County of Kirkcudbright, ——, seen and personally examined Mary Carruthers, ——, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Hugh Gillies L.R.C.P. Ed.

DATED this first day of November One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Mary Carruthers to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of poor

Signature and Address Wm McDonald, Newabbey

Date November 1st 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of (1) Dumfries & Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) William McDonald, Inspector of Poor, Newabbey, Certificates under the hands of Hugh Gillies and Robert B. Campbell being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Mary Carruthers, Craigieside, Newabbey (Pauper) and that the said Mary Carruthers is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Carruthers as a Patient into the (5) Public Asylum of Southern Counties — and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Carruthers which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourth day of November, One thousand nine hundred and two years: One word deleted.

To the Superintendent of the (7) Public Asylum of Southern Counties, Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8969.

Mary Carruthers.

(Kirkcaldy.)

Adm: 1 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — ~~Steward~~ of Dumfries & Galloway, *and his Substitutes,*— at Dumfries:

The Petition of Elizabeth Gillespie, Dobie Cottage, Georgetown:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Gillespie, ——— your Petitioner's (2) Aunt, ———

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Gillespie, ——— to the Crichton Royal Institution, ——— and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) E. Gillespie

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Third (3) day of November, One thousand Nine hundred & four.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Gillespie.
2. Sex and Age,	Female. 53.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	House keeper.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Dobie Cottage. Georgetown.
7. Place where Found and Examined,	do do.
8. Length of time Insane,	Three weeks.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack.	53.
11. When and where previously under Examination and Treatment (5)	Never under treatment before.
12. Duration of Existing Attack,	Three weeks.
13. Supposed Cause,	.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	———
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Niece Miss Elizabeth Gillespie Dobie Cottage. Georgetown.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has been previously in an Asylum, state the date of latest admission or approximate thereto. If never previously under examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Third day of November, One thousand Nine hundred & four.

(*To be signed by the party applying*) E. Gillespie

T. & A. C.—Nov. 1899.

P. p

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thompson ——— being a (1) Doctor of medicine of Glasgow ——— University and Surgeon ——— and being in actual practice as a (2) Physician & Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) Dobie Cottage, Georgetown ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Gillespie, Spinster Housekeeper, Dobie Cottage, Dumfries, and that the said Elizabeth Gillespie, ——— is a (5) person of unsound mind, ——— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Talks quite incoherently, and has delusions about having large sums of money, and other things to dispose of; also about getting married, and has outrages at times —

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, 27 Castle St Dumfries

DATED this Second day of November One thousand nine hundred and two years —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Frederick Hugh Clarke, ——— being a (1) Bachelor of Medicine & Master in Surgery of Glasgow University, ——— and being in actual practice as a (2) Physician & Surgeon ——— do hereby certify, on soul and conscience, that I have this day, at (3) Dobie Cottage Georgetown, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Gillespie, housekeeper Dobie Cottage, Dumfries ——— and that the said Elizabeth Gillespie, ——— is a (5) person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She is full of false fancies herself possessed of great wealth, and promises gifts of motor-cars, greenhouses &c. to her friends. .

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Frederick Hugh Clarke

Place of Abode Charlotte Street Dumfries

DATED this Second day of November, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson being (1) a Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) Georgetown in the County of Dumfries, seen and personally examined Elizabeth Gillespie, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Alex. Thomson

DATED this Second day of November, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Elizabeth Gillespie to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Niece

Signature and Address Elizabeth Gillespie

Date 2nd November 1902 Dobie Cottage Georgetown.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire Advocate, Sheriff-Substitute, of (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Elizabeth Gillespie, Dobie Cottage, Georgetown, Certificates under the hands of Alex. Thomson, and Frederick Hugh Clarke, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Gillespie Dobie Cottage Georgetown, Dumfriesshire, and that the said Elizabeth Gillespie, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Gillespie, as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Gillespie which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourth day of November One thousand nine hundred and two years. one word deleted.

To the Superintendent of the (1) Public *Asylum of* Crichton Royal Institution, Dumfries.

(1) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8968.

Elizabeth Gillespie.

Adm: 3 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) of Dumfries & Galloway *and his Substitutes,—at* Dumfries

The Petition of Mrs Kate Davison

Ballaghy, Co Derry, Ireland

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Duncan Charlemont St Private Hospital, Dublin

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Davison to the Royal Crichton Institution and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Kate Davison

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fourth (4) day of November One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	James Davison
2. Sex and Age,	Male. 50.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	J.R.C.S. In Country practice.
5. Religious Persuasion, so far as known,	Roman Catholic.
6. Previous Place of Abode,	Ballinahill Queens Co Ireland.
7. Place where Found and Examined,	Charlemont St Private Hospital Dublin.
8. Length of time Insane,	about ~~three~~ six months.
9. Whether First Attack,	1st.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	never previously
12. Duration of Existing Attack,	about 3 Months
13. Supposed Cause,	Opium habit
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	doubtful
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	(not Pauper).
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Joseph Davison Ballaghy Co Derry. Mrs Davison (wife) 80 Upr. Gardiner St Dublin (Temporary) No knowledge of family known to be insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state name of latest Asylum or approximate date thereto. If previously under Treatment or Examination, state where and when.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Third day of November One thousand nine hundred and two years

(*To be signed by the party applying*) Kate Davison

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Frederick Edward Ramsford being a (1) Doctor of Medicine of Dublin Uni and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) Charlem St Private Hospital Dublin in the County Dublin separately from any other Medical Practitione visited and personally examined (4) James. Davison and th the said James. Davison is a (5) person unsound mind and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Says. he i inhabited by a Spirit. That it is not he. self that is in him. Is depressed & irritabl Prussic acid is the only thing which would cur

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Attendant in Charge informs me, th Mr Davison is difficult to manage getti at all hours of the night & at time. talking to him away with himself

Name and Medical Designation, Frederick E. Ramsford

Place of Abode, Palmerston House Cha

DATED this 29th day of October One thousan nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Richard Lane Joynt. being a (1) Doctor of Medicine Dublin Univers and being in actual practice as a (2) Surgeon & Physicia do hereby certify, on soul and conscience, that I have this day, at (3) Charlem St Private Hospital Dublin in the County of City of Dublin separately from any other Medical Practitioner visited and personally examined (4) James Davison and that the said James Davison is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Extreem depre States he is quite lost & incurable, that the nineteenth Century is a complete failure - h all was lost that no drugs can cure him exce Prussic Acid

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Attendant Dr Lyons of Hospital states he found hi endeavouring to tie scarf round his neck at nig & subsequently found him concealing a Coat steps in his bed at night.

Name and Medical Designation, Richard Lane Joynt M

Place of Abode, 84 Harcourt St Dublin

DATED this 30th day of October One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Robt B. Campbell. being (1) an M.B. Ch. of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) the Crichton Royal Institution in the County of Dumfries, seen and personally examined James Dawson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of

(3) State place at which Asylum is situated.

Dated 1. 11 '

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution ~~Asylum~~ to receive therein James Dawson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Wife.

Signature and Address Rob Davison 50 Gardiner st Dublin

Date 3rd November 1902.

Signature and Address J. & Davison Solicitor Dumfries

Date 3rd Nov 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (1) Sheriff Substitute of ~~the~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Robt Davison, 50 Upper Gardiner Street Dublin Certificates under the hands of Frederick Edward Ransford and Richard Lane Joynt, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) James Davison, Clanmorris Private Hospital Dublin Ireland and that the said James Dawson is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Dawson as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Dawson which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(2) Insert Name and Designation.

(3) Describe him, and if a Pauper, state so.

(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourth day of November One thousand nine hundred and two years.

To the Superintendent of the (5) Public *Asylum of* Crichton Royal Institution Dumfries.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Frederick Edward Ramsford,
being a (1) Doctor of Medicine of Dublin Univ
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Charleville
St Vincents Hospital Dublin in the County of
Dublin separately from any other Medical Practitioner,
visited and personally examined (4) James. Davison and that
the said James. Davison is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Says he

DATED this day of One thousand
nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Richard Lane Joynt.
being a (1) Doctor of Medicine Dublin Universit
and being in actual practice as a (2) Surgeon & Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Charleville
St Private Hospital Dublin in the County of
City of Dublin separately from any other Medical Practitioner,
visited and personally examined (4) James Davison
and that
the said James Davison is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Extreem depres
States he is quite lost & incurable, that the
nineteenth Century is a complete failure &
all was lost that no drugs can cure him except
Prussic Acid

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Attendant Delvin of Hospital states he found him
endeavouring to tie scarf round his neck at night
& subsequently found him concealing a leather
strap in his bed at night.

Name and Medical Designation, Richard Lane Joynt MD
Place of Abode, 84 Harcourt St Dublin

DATED this 30th day of October One thousand
nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Robt. B. Campbell.
being (1) an M.B. Ch. of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) the Crichton Royal Institution
in the County of Dumfries, seen and personally examined
James Dawson, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of abode.
(3) State place at which Asylum is situated.

Robt. B. Campbell. M.B.Ch.

DATED this 3rd day of November One thousand nine hundred and five.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution
~~Asylum~~ to receive therein James Dawson.
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother.

Signature and Address J. & J. Dawson Bellaghy Co Derry.

Date 3rd Nov. 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, (1) Sheriff Substitute
of ~~the~~ Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) Kate Dawson,
50 Upper Gardiner Street Dublin
Certificates under the hands of Frederick Edward Ramsford
and Richard Lane Joynt being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) James Dawson, Chadmont House Private Hospital Dublin (Ballsbridge) and that the said James Dawson is a (4) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Dawson as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Dawson which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fourth day of November
One thousand nine hundred and two years.

To the Superintendent of the (6) Public, Asylum of Crichton Royal Institution Dumfries.

Geo: Campion
[Signature]

(6) Public, District, Parochial, or Private.

No 8969.

James Davison

Adm: 3 November 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of Dumfries & Galloway at Kirkcudbright *and his Substitutes,—*

The Petition of Samuel Rigg Inspector of Poor of Kellon

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie Johnstone your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jessie Johnstone to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Samuel Rigg

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 4th (3) day of November One thousand nine hundred & two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jessie Johnstone
2. Sex and Age,	Female 24
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Castle Douglas
7. Place where Found and Examined,	Castle Douglas
8. Length of time Insane,	Two days
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	24
11. When and where previously under Examination and Treatment (4)	–
12. Duration of Existing Attack,	Two days
13. Supposed Cause,	None known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kellon
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Annie Johnstone Liverpool Mother None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	–

(4) If patient has previously in an asylum, state the date of latest admission or approximate thereto. If previously under observation or treatment state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fourth day of November One thousand nine hundred & two

(To be signed by the party applying) Samuel Rigg

P.P.

T. & A. C.—April 1900.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Robert Bell Lawrie
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Natural Bank
Castle Douglas
Kirkcudbright
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Jessie Johnstone, Natural
Castle Douglas Pauper.
and that
the said Jessie Johnstone is a (5) person of
unsound mind
and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
She has a vacant appearance, seems not to comprehend what is said. Becomes very excited & rushes out of house. Rambles incoherently & speaks of Jesus at times. Has a mistaken idea of personality of time.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Gillespie Talk mentioned that she has been subject to spasm for some time past & almost constant vacancy of look, has become much worse of late.

Name and Medical Designation, Robert Bell Lawrie
M.B.C.M.Ed.

Place of Abode, Castle Douglas

DATED this fourth day of November One thousand nine hundred and two

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Edward Bateman Hector
being a (1) Doctor of Medicine of the University of Edinburgh
and being in actual practice as a (2) General practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) The National Bank
Castle Douglas
Kirkcudbright
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Jessie Johnstone - National Bank
Castle Douglas
and that
the said Jessie Johnstone, Pauper is a (5) person of unsound
mind
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I found her gesticulating and muttering in the passage of the house - threatened violence to one of her fellow servants - her looks are wild.

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Gillespie, her mistress, National Bank Manager, Castle Douglas informed me that the girl has for two days been a source of trouble to all in the house - that she has been very excitable & sometimes violent in her manner & conversation, & also refuses to obey orders given her by any of the servants in the house.

Name and Medical Designation, Edward Bateman Hector
M.D.

Place of Abode Castle Douglas, N.B.

DATED this fourth day of November One thousand nine hundred and two

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, [illegible]
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Dated this day of One thousand nine hundred

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the

Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, }

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Laurence Swarbreck Napier Esquire Sheriff Substitute of ~~of the~~ (2) Dumfries and Galloway at Kirkcudbright having had produced to me, with a Petition at the instance of (3) Samuel Rigg Certificates under the hands of Robert Rae Lorraine and Edward Bateman being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jessie Johnstone, Pauper and that the said Jessie Johnstone is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jessie Johnstone as a patient into the ~~Southern Counties~~ Asylum of Dumfries and I authorize ~~her~~ Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jessie Johnstone which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated [at Kirkcudbright] this ~~fifth~~ sixth day of November, One thousand nine hundred and two years.

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Laurence S. Napier

No. 8940.

Jessie Johnstone.
(Melton)

Adm: 4 November 1902:

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) ~~Sheriff of the (2) Shire~~ of Dumfries & Galloway *and his Substitutes*— at Dumfries:

The Petition of Isabella M. Dickie, Lower, Kirkconnel,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Archibald David Dickie,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Archibald David Dickie, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Isabella M Dickie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Tenth (4) day of November, One thousand nine hundred and Two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Archibald David Dickie.
2. Sex and Age,	Male. 30.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farmer's Son.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Town. Kirkconnel.
7. Place where Found and Examined,	do do.
8. Length of time Insane,	Two months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	30.
11. When and where previously under Examination and Treatment (5)	Never under treatment before.
12. Duration of Existing Attack,	Two months.
13. Supposed Cause,	Not known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mother. Mrs Dickie Town, Kirkconnel.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) Patient has previously in an Asylum, state date of latest admission or approximate date thereto. If previously under Medical Certificate or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 10th day of Nov., One thousand nine hundred and Two.

(To be signed by the party applying) Isabella M Dickie

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Richard Gillanders Anderson —
being a (1) Licentiate of Royal College of Physicians Ed. & Licentiate of
of Phys. & Surgeons Glas:
and being in actual practice as a (2) General Practitioner,
do hereby certify, on soul and conscience, that I have this day, at (3) Lower, Birk-
Birkenmuir, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Archibald Donald Dickie, Farmer, Son, Lower, Birkenmuir, and that
the said Archibald David Dickie, is a (5) person of un-
Mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is under the im-
that he has received an injury from which he will
recover: very nervously & confused in his m
& Outs & stutters at times with his hand

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His mother States that he sleeps badly
has outbursts of temper occasionally wh
he leaves abusive to his & other Membe
of the family.

Name and Medical Designation, R. Gillanders Anderson
L.R.C.P. Ed & L.F.P.S. Glas

Place of Abode, New Cumnock

DATED this Eighth day of November, One thousand
nine hundred and two years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thomson —
being a (1) Doctor of Medicine of Glasgow
University & Surgeon
and being in actual practice as a (2) Physician & Surgeon —
do hereby certify, on soul and conscience, that I have this day, at (3) The
Crichton Royal Institution, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Archibald David Dickie,
Farmer's Son, Lower, Birkenmuir, Dumfries Shire and that
the said Archibald David Dickie, is a (5) person
of unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has a depressed
and stupid appearance: talks in a confused and
incoherent manner about injuries he has received
and operations on his body: hears voices telling
him to go and do things, when there is no
one present.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 24 Castle Street, Dumfries

DATED this Tenth day of November One thousand
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Richard Gilbertson Robertson — being (1) Lic. Royl. Col. Phys. Ed. & Lic. Fac. Phys. & Surgs. Glas. hereby certify, on soul and conscience, that I have this day, at (2) Tower, in the County of Dumfries —, seen and personally examined Architect David Dickie —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

R. G. Robertson

DATED this Eighth day of November, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on).

I hereby request the Superintendent of the Crichton Royal — Asylum to receive therein Archibald David Dickie — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother.

Signature and Address Isabella M. Dickie

Date 8. November, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute of ~~the~~ (1) Dumfries & Galloway - at Dumfries — having had produced to me, with a Petition at the instance of (2) Isabella M. Dickie, Tower, Kirkconnel, Certificates under the hands of Richard Gilbertson, Robertson — and Alexander Thomson, — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Archibald David Dickie, Tower, Kirkconnel, Dalbeattie, and that the said Archibald David Dickie, as a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Archibald David Dickie as a Patient into the (6) Public — Asylum of Crichton Royal Institution, and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Archibald David Dickie, — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Eleventh day of November, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8941

Archibald David Dickie

Adm: 8 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Dumfries & Galloway, and his Substitutes, at Dumfries:

The Petition of Edward Arthur Golding. Clerk in Holy Orders, Bandon, Co Cork, Ireland.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Edith Mary Golding, your Petitioner's (3) sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Edith Mary Golding, to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Edw. A. Golding, clk.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 8th (4) day of Nov. One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Edith Mary Golding.
2. Sex and Age,	Female. 29 years on 28/12/01.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Trained nurse.
5. Religious Persuasion, so far as known,	Church of Ireland.
6. Previous Place of Abode,	Bandon, Co Cork.
7. Place where Found and Examined,	Bandon
8. Length of time Insane,	Perhaps 6 months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	never
12. Duration of Existing Attack,	Perhaps 6 months
13. Supposed Cause,	Strain of her profession.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	Once talked of it. Never actually threatened
16. Whether Dangerous to others,	Not at all.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	See above. No member known to have been so afflicted.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest Order or approximate date. If previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 8th day of November One thousand nine hundred and two years.

(*To be signed by the party applying*) Edw. A. Golding.

P. p.

. & A. C.—March 1902.

No. 8911

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Reid,
being a (1) Doctor of Medicine Royal University Ireland, Physician,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have ~~this day~~, at (3) Killowen Villa Bandon,
Cork,
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Miss Edith M. Goldings,
and that the said Miss E. M. Goldings, is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Assured me that she was kept a close prisoner whilst on a visit with her brother the fact being that she was perfectly free. At Dungulf he saw her come and go from his house walking about alone on several occasions. She also visited me with regard to ailments which were totally imaginary,

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her brother & Aunt informed me (1). That she frequently talks of being poisoned
(2). That she has taken unreasonable dislikes to
Kindest friends.
(3). That on occasion she spoke of suicide, but
not actually threatening it.
(4). That without reason she changed all her effects.

Name and Medical Designation, John Reid. Bs. and D. M.

Place of Abode, Bank Place. Bandon.

DATED this 8th day of November, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Thomas W. Smyth,
being a (1) Member of the Royal College of Physicians Surgeons Edinburgh,
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have ~~this day~~, at (3) Killowen Villa Bandon,
Cork,
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Miss Edith M. Goulding,
and that the said Miss Edith M. Goulding, is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She informed me that she was suffering from Consumption whereas she is not, and on another occasion informed me for an imposing delusion of the Same.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her brother informs me that the Same has Clothes & Cheques of Something Value

Name and Medical Designation, Thomas W. Smyth Physician & Surgeon

Place of Abode, Roscullenmishen Co Cork

DATED this 7th day of November, — One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate (1) Sheriff Substitute, of the (2) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) Edward Arthur Golding, Clerk in Holyfordey, Bandon, Co Cork, Ireland, Certificates under the hands of John Reid, and Thomas W. Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Edith M. Golding, Killeen Glebe, Bandon, Ireland, and that the said Edith M. Golding is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Edith M. Golding as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Edith M. Golding, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Eleventh day of November One thousand nine hundred and two years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution, at Dumfries

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8472

Edith Mary Golding.

Adm: 11 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) ~~Sheriff~~ — ~~of the~~ (2) ~~County~~ of Dumfries ~~Tallow~~ and his Substitutes, — at Dumfries:

The Petition of Agnes Jane Hunter or Crouch, Lochvale, Lochmaben:

Humbly sheweth, that it appears from the subjoined Statement, and accompanying Medical Certificates, that Henry Brougham Crouch, — your Petitioner's (3) husband, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Henry Brougham Crouch — to the Crichton Institution, — and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Agnes Jane Hunter or Crouch

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this ~~7th~~ 13th day of (4) November, One thousand nine hundred and ~~two~~ two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Henry Brougham Crouch.
2. Sex and Age,	male - 65 years -
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	Jewellers.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Rosevale, Lochmaben.
7. Place where Found and Examined,	Rosevale, Lochmaben.
8. Length of time Insane,	—
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	always at home.
12. Duration of Existing Attack,	—
13. Supposed Cause,	Business worry.
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Threatened to do so.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Agnes Jane Crouch. Lochvale, Lochmaben. - wife - not known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an asylum, state name of latest asylum or asylums. If not previously under asylum or treatment, so state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this ~~7th~~ 13th day of November, One thousand nine hundred and two years.

(*To be signed by the party applying*) Agnes Jane Hunter or Crouch

P. T. & A. C.—August 1901.

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Thomas Reid of Glasgow Lun
being a (1) Doctor of Medicine of Glasgow Lun
and being in actual practice as a (2) Consul Practitioner,
do hereby certify, on soul and conscience, that I have this day, at (3) Roseva
Lochmaben, Dumfries, — separately from any other Medical Practitione
visited and personally examined (4) Henry Brougham Crouch,
Jewella, Rosevale, Lochmaben, — and that
the said Henry Brougham Crouch, is a (5) person
of unsound mind, — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the followin
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He is very
suspicious of every one, thinks that his wife & dau
are conspiring against him, that he is like a man fr
Siberia and has pictures with thousands, all of w
are delusions.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Maria Jessie Crouch, his daughter says that h
quite unmanageable, threatens to commit sui
thinks that he is possessed of great wealth an
a great distillery to all his family and says that various
have ruined his family.

Name and Medical Designation, Thomas Reid M.B.

Place of Abode, Lochmaben

DATED this 12th day of November, One thousan
nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Archd George Sanders,
being a (1) Bachelor of Medicine & Master in Surgery of
Glasgow University, Physician & Surgeon
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3) Roseva
Lochmaben, Dumfries, — separately from any other Medical Practitioner,
visited and personally examined (4) Henry Brougham Crouch
Jewella, Rosevale, Lochmaben, — and that
the said Henry Brougham Crouch is a (5) person
of unsound mind, — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He is discontented
with his surroundings, wants change, says th
his family do not consider him sui suspicious
Says he has a house built in Edinburgh worth between
two & three thousand pounds.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) that
His son wife & daughter all upon me he never had
any house. That he is discontented always wanting
change, becomes unmanageable & has said he would
commit suicide. That he has exaggerated ideas of his mea

Name and Medical Designation, Archd. Sanders M.B.

Place of Abode, Lochmaben

DATED this thirteenth day of November, — One thousand
nine hundred and two —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Norman Reid of Glasgow
being (1) a doctor of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) Rosevale, Lochmaben,
in the County of Dumfries, seen and personally examined
Henry Brougham Crouch, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Norman Reid. M.D.

DATED this 12th day of November — One thousand nine hundred and Two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Henry Brougham Crouch, —— to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, wife

Signature and Address Maria Jane Hunter or Crouch

Date 13th November, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff-Substitute, of the Dumfries & Galloway, at Dumfries, — having had produced to me with a Petition at the instance of (4) Maria Jane Hunter or Crouch, Lochvale, Lochmaben Certificates under the hands of Thomas Reid, —— and Arch: G. Sanders, —— being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Henry Brougham Crouch Rosevale, Lochmaben, Peter Hackett, and that the said Henry Brougham Crouch, is a (6) person of unsound mind, ——

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(5) Describe him, and if a Pauper, state so.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Henry Brougham Crouch, as a Patient into the (7) Public Asylum of Crichton Royal Institution and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Henry Brougham Crouch, — which accompanied the said Petition.

(7) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fourteenth day of November, One thousand nine hundred and two years.-

To the Superintendent of the (7) Public —— Asylum of Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8943

Henry Brougham Crouch

Adm: 13 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) ~~Shire~~ *of* Dumfries & Galloway *and his Substitutes, at* Dumfries.

The Petition of Alex Milroy Inspector of Poor, Dalry, Galloway, —

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Charters or Wilson your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Charters or Wilson to the Southern Counties asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Alex Milroy

DATED this Fourth (4) day of November One thousand ~~eight~~ nine hundred and two

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Charters or Wilson
2. Sex and Age,	Female 28 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Outdoor worker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dalry Galloway
7. Place where Found and Examined,	Dalry Galloway
8. Length of time Insane,	Two months
9. Whether First Attack,	First
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	—
12. Duration of Existing Attack,	Two months
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dalry Galloway
18. Date of becoming Chargeable,	4th Nov. 1902
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Agnes Wilson, Mother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fourth day of November One thousand ~~eight~~ nine hundred and two

(To be signed by the Party applying) Alex Milroy, Inspector of Poor P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Ernest Lawrie Forde being a (1) Licentiate of the Royal College of Physicians & Surgeons of Edinburgh and being in actual practice as a (2) Medical practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Bank Street Dalry. Galloway Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Margaret Charteris or Wilson and that the said Margaret Charteris or Wilson is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1 Facts indicating Insanity observed by myself: (6) She is very reckless & has twice tried to Commit Suicide. The first time she had round off great difficulty in bringing trying to throw herself.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her mother & aunt have told me that she has often threatened to Commit Suicide

Name and Medical Designation, Ernest S. Forde L.R.C.P. & S.

Place of Abode, Dalry. Galloway

DATED this 4th day of November One thousand nine hundred and two

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Cowan being a (1) Bachelor of Medicine & Master of Surgery and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Dalry Galloway Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Margaret Charteris or Wilson and that the said Margaret Wilson is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has a vacant listless & melancholy expression Complains of a confused feeling in her head and says She is always in fear of being taken away & somewhere admits that last night she put a knife to her throat but says she does not think she would have done herself

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mother says She has noted a change in her manner since August. On first week of September she came home from field suffering from very severe headache. A few days after that had been in the habit apparently attempting suicide and a day or two ago had tried to hang herself with a piece of rope. Her despondency & moodiness & sullenness the last few months and wanders

Name and Medical Designation, John Cowan M.B. C.M.

Place of Abode New Galloway

DATED this 4th day of November One thousand eight hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Ernest Switzer Forde
being (1) a R.R.C.S., Ed.
hereby certify, on soul and conscience, that I have this day, at (2) Baby Galloway
in the County of Kirkcudbright seen and personally examined
Margaret Charleston Wilson, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.
And I further certify that the case of the said person is one of Emergency.
she is in a sufficiently good state of bodily health at this date to be removed to the Asylum at Dumfries.

Ernest Switzer Forde

DATED this fourth day of November One thousand nine hundred and two.

(1) State medical qualification.
(2) State place of examination.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal
Asylum to receive therein Margaret Charters Wilson
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ~~Pauper~~ Inspector of Poor

Signature and Address Alex Milroy Dalry Galloway

Date 13th Nov. 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I George Campion (1) Sheriff Substitute
of the (2) Dumfries and Galloway, at Dumfries
having had produced to me, with a Petition at the instance of Alexander Milroy
Inspector of Poor, Dalry, Galloway,
Certificates under the hands of Ernest Switzer Forde
and John Corrie, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Margaret Charters Wilson, Dalry, Galloway. (a pauper) - and that the said Margaret Charters Wilson is a (4) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Charters Wilson as a Patient into the (5) Public Asylum of Southern Counties Dumfries - and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Charters Wilson, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED this Fifteenth day of November One thousand ~~eight~~ nine hundred and two years.-

Geo. Campion

To the Superintendent of the (5) Public, *Asylum of* Southern Counties, Dumfries.

(5) Public, District, Parochial, or Private.

No. 8944

Margaret Charters or Wilson

(Baby)

Adm: 13 November 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Lanark *and his Substitutes,—*

The Petition of Alexander Harper, 768 Albert Road, Langside, Glasgow

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Finlay Harper, residing at above address is your Petitioner's (3) Brother

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said ~~Alexander~~ William Finlay Harper to the Crichton Royal Institution, Dumfries and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Alex Harper

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 12th (4) day of November One thousand ~~nine~~ eight hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	William Finlay Harper
2. Sex and Age,	male. 38 years of age.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	Clerk.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	768 albert Rd. Langside Glasgow
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	about twelve months
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	37.
11. When and where previously under Examination and Treatment (5)	Never previously treated
12. Duration of Existing Attack,	One year
13. Supposed Cause,	Influenza
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	not yet.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Cathcart Parish~~
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Marion Harper, 768 albert Rd. Langside. Glasgow. Mother no.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Establishment, state name and date of latest admission or approximate thereto. If not previously under Examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 10th day of November One thousand ~~eight~~ nine hundred and two

(*To be signed by the party applying*) Alex. Harper.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Brown being a (1) Doctor of Medicine and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 268 Albert Road Langside Renfrew in the County of separately from any other Medical Practitioner, visited and personally examined (4) William Finlay Harper and that the said William Finlay Harper is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Chewing of tongue Constantly - Talking Aurtantly, Cries & Whimpers - Loss of Memory - Wanting his ears Syringed with Wind bottle, of oil - Says he cannot Swallow, and stops Eating in the middle of a meal, & cant Swallow

2. Other facts (if any) indicating Insanity communicated to me by others: (7) In writing letters, fills them with disjointed Sentences, & no sense. - Wanders away from home, and Cant tell where he has been - Goes to places but never Seems to know his destination & Cant tell Why

Name and Medical Designation, Robert Brown M.D.

Place of Abode, ~~268 Albert Road~~ Kerle Road Pollokshields

DATED this 29th day of November, One thousand eight hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Adam Brown Kelly being a (1) M.B.; C.M. and being in actual practice as a (2) Surgeon for Diseases of the Throat, &c do hereby certify, on soul and conscience, that I have this day, at (3) 26 Blythswood Square Glasgow in the County of separately from any other Medical Practitioner, ~~visited and~~ personally examined (4) William Finlay Harper, 268 Langside Road, Glasgow and that the said William Finlay Harper is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Generally dazed condition. Complains of various symptoms in throat and ears of which he cannot give a lucid account. Writes incoherent letters. States that he fought and killed a man in Queen Street. Asserts that he can write Shorthand at a speed of 360 words a minute, and on being tested he puts down a number of meaningless signs.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, A. Brown Kelly M.B. C.M.

Place of Abode 26 Blythswood Square Glasgow

DATED this eleventh day of November One thousand eight hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

(1) State medical qualification.
(2) State place of examination.

And I further certify that the case of the said person is one of Emergency.

Dated this day of One thousand eight hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William George Scott-Moncrieff (1) Sheriff Substitute of the (2) County of Lanark having had produced to me, with a Petition at the instance of (3) Alexander Harper, 768 Albert Road, Langside, Glasgow Certificates under the hands of Robert Brown and Adam Brown Kelly, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Kirkay Harper 768 Albert Road Langside, Glasgow Petitioners Brother and that the said William Kirkay Harper is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Kirkay Harper as a Patient into the (6) Crichton Royal ~~Asylum of~~ Institution Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Kirkay Harper which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

Dated this Twelfth day of November One thousand ~~eight~~ nine hundred and two.

W. G. Scott-Moncrieff

To the Superintendent of the (7) Crichton Royal Institution Asylum of Dumfries.

(7) Public, District, Parochial, or Private.

No. 8975.

William Findlay Harper

Adm: 15 November 1952.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff —*of the* (2) Dumfries & Galloway — *and his Substitutes,* at Dumfries:-

The Petition of Samuel B. Brown, —

24 Atlantic Avenue Belfast —

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs. Elizabeth Wilson,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Sister in Law, — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Wilson, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Sam[t] B Brown

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty first (4) day of —November, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Elizabeth Wilson.
2. Sex and Age,	Female. 64.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Wife of Linen Merchant.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Marino. Holywood. Co. Down.
7. Place where Found and Examined,	24 Atlantic Avenue. Belfast.
8. Length of time Insane,	Crichton Royal Institution. 3 months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	64.
11. When and where previously under Examination and Treatment (5)	Never
12. Duration of Existing Attack,	3 months.
13. Supposed Cause,	Worry incidental to Death of Husband.
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	—
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Samuel B. Brown. 24 Atlantic Avenue. Belfast. Brother-in-Law.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state date of latest admission or approximation thereto. If not previously under Examination or Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Nineteenth day of November, One thousand nine hundred and two years.

(*To be signed by the party applying*) Sam[t] B Brown

P. P.

T. & A. C.—March 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, John Rusk
being a (1) Medical Graduate of the Royal University Ire
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 24 Atlantic
Belfast in the County of
~~Down~~ Antrim Ireland — separately from any other Medical Practitioner
visited and personally examined (4) Mrs Elizabeth Wilson, of
Marine, Holywood, Belfast, and that
the said Mrs Eliz. Wilson, is a (5) person of
unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
(1). Great morbid depression without sufficient cause
(2). Occasional outbreaks of violence uncontrollable.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
(a). Daughter states she shews almost every day a viol
outburst of temper on two, 3, or more occasions without
shewing tendency to injure others, if not restrain

Name and Medical Designation, John Rusk M.B.B.
Place of Abode, Bracefield Belfast

Dated this 18th day of Nov. One thousand
nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

I, the undersigned, Alexander Thompson
being a (1) Doctor of Medicine of Glasgow University
And Surgeon
and being in actual practice as a (2) Physician and Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) The
Cruelton Royal Institution — in the County of
Dumfries — separately from any other Medical Practitioner,
visited and personally examined (4) Elizabeth Wilson. Widow of linen
Merchant. Marine, Holywood, Belfast, Co Down and that
the said Elizabeth Wilson is a (5) person
of unsound mind — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has a depressed
appearance: and says she feels very nervous, and
gets worried and excited about trifles: thinks some
thing dreadful is going to happen to her, and that
great ruin is going to ruin: talks in a stupid manner
about these things, and also about the state of her health

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.
Place of Abode, 27 Castle Street, Dumfries

Dated this Twenty-first day of November One thousand
nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Rusk, being (1) M.B. B.Ch. of Royal University Ireland, hereby certify, on soul and conscience, that I have this day, at (2) 24 Atlantic Ave. Belfast in the County of Antrim, seen and personally examined Mrs. Elizabeth Wilson, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton (Royal Institution Dumfries).

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

(3) State place at which Asylum is situated.

John Rusk

DATED this 18th day of Nov. One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Mrs. Elizabeth Wilson, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother-in-law

Signature and Address Jas. B. Brown

Date 19th November 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (1) Sheriff-Substitute of the Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Samuel B. Brown, 24 Atlantic Avenue, Belfast, Certificates under the hands of John Rusk and Alexander Thomson — being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Elizabeth Wilson, Married, Holywood, Belfast, Co. Antrim, and that the said Mrs Elizabeth Wilson, is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Elizabeth Wilson as a Patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Elizabeth Wilson which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.

(2) State whether a County or Stewartry.

(3) Insert Name and Designation.

(4) Describe him, and if a Pauper, state so.

(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty-first day of November, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries.

Geo. Campion

[Signature]

(7) Public, District, Parochial, or Private.

No. 8946.

Elizabeth Wilson.

Adm: 19 November 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) ~~County~~ of Dumfries & Galloway *and his Substitutes,*— at Dumfries.

The Petition of Alexander Smith Sellar, 3 Windsor Street, Glasgow:—

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Alice Mary Smith Sellar, your Petitioner's (2) Sister, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alice Mary Smith Sellar, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Alex^r Smith Sellar

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (3) day of November, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Alice Mary Smith Sellar.
2. Sex and Age,	~~Female~~; age 30 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Domestic.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	3 Windsor Street, Glasgow.
7. Place where Found and Examined,	3 Windsor Street, Glasgow.
8. Length of time Insane,	Three weeks.
9. Whether First Attack,	Second, but not previously certified
10. Age (if known) on First Attack,	27 years.
11. When and where previously under Examination and Treatment (4)	—
12. Duration of Existing Attack,	Three weeks.
13. Supposed Cause,	Hereditary.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Alexander Smith Sellar 3 Windsor Street, Brother of Petitioner. Mother, and two maternal Aunts.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(4) If patient has previously in an Asylum, state date of latest admission or approval thereto. If previously under Examination or Treatment, state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of November, One thousand nine hundred and two years.

(To be signed by the party applying) Alex^r Smith Sellar

P. p.

T. & A. C.—March 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Carswell, being a (1) Licentiate of the Royal College of Physicians and of the Faculty of Physicians & Surgeons, and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 3 Windsor Street, Glasgow, in the County of Lanark, separately from any other Medical Practitioner visited and personally examined (4) Alice Mary Smith Sellar, residing there, Domestic, and that the said Alice Mary Smith Sellar is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is confused in mind, is incoherent in conversation and she is irrational and delusive in her ideas. She cannot be got to give any rational replies to questions.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her brother states that she is sleepless restless at night, that she has hallucinations of hearing, and that she refuses food

Name and Medical Designation, J. Carswell L.R.C.P.E.

Place of Abode, 5 Royal Crescent W. Glas

DATED this 28th day of November, One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Robert Gilbert Inglis being a (1) Bachelor of Medicine & master of Surg of Glasgow University and being in actual practice as a (2) physician do hereby certify, on soul and conscience, that I have this day, at (3) 3 Windsor Glasgow, in the County of Lanark, separately from any other Medical Practitioner, visited and personally examined (4) Alice Mary Smith Sellar, Spinster, 3 Windsor Street Glasgow, and that the said Alice Mary Smith Sellar is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is depressed and can be got to answer questions only with difficulty. Her replies are confused & incoherent and sometimes totally irrelevant. She says that she hears voices and requires much coaxing before she can be induced to take any food.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Sister, Helena Jessie Sellar, 3 Windsor St states that she often stands for a long period & cannot be got to sit down unless led into a chair. She states also that she has great difficulty in getting her to remove her clothes before going to bed & that she can hardly get her to take any nourishment.

Name and Medical Designation, Robert Gilbert Inglis M.B.

Place of Abode, 3 West Graham St Glasgow

DATED this 28th day of November, One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Carswell, ——— being (1) a Licentiate of the Royal College of Physicians hereby certify, on soul and conscience, that I have this day, at (2) 3 Windsor Street, Glasgow, in the County of — Lanark —, seen and personally examined Alice Mary Smith Sellar, —, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

J. Carswell M.B. C.M.

DATED this 29th — day of November, One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Alice Mary Smith Sellar —— to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Alex Smith Sellar, 3 Windsor St, Glasgow

Date 29th November 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire, Advocate, Sheriff Substitute, of the (1) Dumfries & Galloway at ~~at~~ Dumfries, ——— having had produced to me, with a Petition at the instance of (2) Alexander Smith Sellar, 3 Windsor Street, Glasgow, ——— Certificates under the hands of John Carswell, ——— and Robert Gilbert Inglis, ——— being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Alice Mary Smith Sellar, 3 Windsor Street, Glasgow (Pauper) and that the said Alice Mary Smith Sellar, is a (4) person of unsound mind, ——— and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alice Mary Smith Sellar, —as a Patient into the (5) Public —— Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alice Mary Smith Sellar, — which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this First day of December, One thousand nine hundred and two years. Two words deleted.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8944.

Alice Mary Smith Sellar.

Adm: 29 November 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) Shire~~ of Dumfries & Galloway and his Substitutes,— at Dumfries.

The Petition of Robt Brown, 44 Witch Road, Kilmarnock.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Borland Cunningham Brown,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isabella Borland Cunningham Brown to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Robert Brown

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fourth (4) day of December One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Isabella Borland Cunningham Brown.
2. Sex and Age,	Female - twenty one.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Student at Free Church Normal Coll.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	44 Witch Rd. Kilmarnock.
7. Place where Found and Examined,	44 Witch Rd. Kilmarnock.
8. Length of time Insane,	Two weeks.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	Twenty one.
11. When and where previously under Examination and Treatment (5)	Never previously.
12. Duration of Existing Attack,	Two weeks.
13. Supposed Cause,	Over study.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	-
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Brown - father - 44 Witch Rd. Kilmarnock. no history of insanity.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously in an Asylum, state the date of latest admission or approval thereto. If not previously under Examination or Treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 4th day of December, - One thousand nine hundred & two.

(*To be signed by the party applying*) Robert Brown

T. & A. C.—Sept. 1900.

P p.

No. 8944

MEDICAL CERTIFICATE, No 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Currie Robertson ——
being a (1) Graduate in medicine of Glasgow University
and being in actual practice as a (2) physician ——
do hereby certify, on soul and conscience, that I have this day, at (3) 44 Witch Rd Kilmarnock, —— in the County of Ayr, —— separately from any other Medical Practitioner, visited and personally examined (4) Isabella Borland Cunningham Brown 44 Witch Rd Kilmarnock —— and that the said Isabella Borland Cunningham Brown is a (5) person of unsound mind —— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She says she hears bells ringing; that her body is enlarged; that her throat is wide & her face small & has death stamped on it; that she is dying & has lost her last chance.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her father & mother informed me that she refuses food occasionally & insists on getting up to bed; that she has disposed of her belongings; that she said some one in the house will a coffin for her she

Name and Medical Designation, Robert Currie Robertson M.B.

Place of Abode, Holmhead Kilmarnock

DATED this fourth day of December, One thousand nine hundred & two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William McAlister ——
being a (1) Doctor of medicine of the University of Glasgow ——
and being in actual practice as a (2) physician ——
do hereby certify, on soul and conscience, that I have this day, at (3) 44 Witch Road, Kilmarnock —— in the County of Ayr, —— separately from any other Medical Practitioner, visited and personally examined (4) Isabella Borland Cunningham Brown, —— and that the said Isabella Borland Cunningham Brown, is a (5) person of unsound mind, —— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She is much excited, incongruent in her ideas and actions, gives utterance to delusions about her immediate death, and in conversation gives irrelevant answers and fails to maintain questions.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) She has been much excited and at times violent since yesterday, refuses food at times and passes her evacuations in bed.

Name and Medical Designation, William McAlister M.D.

Place of Abode The Elms, Kilmarnock

DATED this fourth day of December, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, William McAllister, being (1) a Doctor of Medicine of the University of Glasgow hereby certify, on soul and conscience, that I have this day, at (2) 44 Witch Road, Kilmarnock in the County of Ayr, seen and personally examined Isabella Borland Cunningham Brown, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Crichton Royal Institution, Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

William McAllister M.D.

DATED this fourth day of December — One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Dumfries Asylum to receive therein Isabella Borland Cunningham Brown. to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address Robert Brown 44 Witch Road Kilmarnock

Date fourth December 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire Advocate, Sheriff-Substitute — of the (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Robert Brown, 44 Witch Road, Kilmarnock. Certificates under the hands of Robert Currie Robertson, and William McAllister, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Isabella Borland Cunningham Brown 44 Witch Road, Kilmarnock (Notes added) and that the said Isabella Borland Cunningham Brown, is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Isabella Borland Cunningham Brown as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Borland Cunningham Brown, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Fifth day of December — One thousand nine hundred and two years. One word deleted

To the Superintendent of the (7) Asylum of Public Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[*Signature*] Geo. Campion

No. 8948.

Isabella Borland C. Brown.

Adm: 4 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Renfrew and his Substitutes.—

The Petition of Alex. Meikle, Inspector of Poor Lieval Parish, Stenrsaye

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Campbell, 79 Shenchan Street Stenrsaer your Petitioner's (3) Parish Lunatic

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Campbell to the Southern Counties Asylum, Dumfries and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Alex Meikle

(4) The date of the Petition must be within fourteen clear days after the following the dates of the Medical Certificates.

DATED this 26th (4) day of December One thousand nine hundred and two years

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Thomas Campbell
2. Sex and Age,	Male aged 32 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Hostler
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	79 Shenchan Street Stenrsaer
7. Place where Found and Examined,	79 Shenchan Street Stenrsaer
8. Length of time Insane,	6 days
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	32
11. When and where previously under Examination and Treatment (5),	
12. Duration of Existing Attack,	6 days
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lieval Parish Council
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mother Mrs Mary Campbell Church St. Renfrew No
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has been previously in an Establishment, state the name and date of latest admission or approximate date thereof. If patient previously under Examination or Treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 26th day of December One thousand nine hundred and two years

(*To be signed by the party applying*) Alex Meikle

T. & A. C.—March 1899.

P.p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Alexander Anderson being a (1) Doctor of Medicine of Glasgow University and being in actual practice as a (2) Physician and Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 79 Shenkat Stranraer Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Thomas Campbell, Boiler Maker Retired, Stranraer and that the said Thomas Campbell is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

1. Staring look. 2. Rapid pulse. 3. Incoherent 4. Has delusions viz. that people are giving him to slightly him and are persecuting him.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr Freeman, his sister, states that he imagines people doing him harm and that he takes fits of great agita and that in one of these he furiously attacked her da and that four men were required for her relea

Name and Medical Designation, J. A. Anderson M.D.

Place of Abode, 21 Lewis St. Stranraer

DATED this sixth day of December One thousand ~~eight~~ hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Hunter being a (1) Bachelor of Medicine & Master of Surgery Aberdeen Universities and being in actual practice as a (2) physician & Surgeon. do hereby certify, on soul and conscience, that I have this day, at (3) 79 Shenkat Stranraer Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Thomas Campbell and that the said Thomas Campbell is a (5) Person of Unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) (1) Excited appea (2) Incoherent speech (3) Suspicious delusions that people are annoying him and dogs a disturbing him

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Mr Freeman his brother-in-law informs me he sleeps none and keeps on talking about p trying to persecute him and that dogs are follow He walked today a dist of six years between the wars

Name and Medical Designation, Thomas Hunter MB. CM

Place of Abode Hanover House Stranraer

DATED this sixth day of December One thousand ~~eight~~ hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Alexander Anderson,
being (1) a Doctor of Medicine of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) 79 Shenbank
in the County of Caplaw, seen and personally examined
Thomas Campbell, Hawker, 79 Shenbank, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a
sufficiently good state of bodily health at this date to be removed to the Asylum
at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

J Alexander Anderson MD

DATED this twelfth day of December One thousand eight hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on)

I hereby request the Superintendent of the Southern Counties
Asylum to receive therein Thomas Campbell
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Alexander Anderson

Date 11 December 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Cameron Esquire (1) Honorary Sheriff Substitute
of the (2) Shrieffdom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) Alexander
Anderson Inspector of Poor & Iswalt Parish Dumfries
Certificates under the hands of John Alexander Anderson M.D
and Thomas Harper M.R.C.S. being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Thomas Campbell 79 Shenbank & Stranraer Parish and that the said
Thomas Campbell is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Campbell as a Patient into the Southern Counties Asylum of Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Campbell which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Stranraer] this seventh day of December
One thousand ~~eight~~ hundred and two

To the Superintendent of the (6)
Southern Counties *Asylum of* Dumfries

(6) Public, District, Parochial, or Private.

[*Signature*] John Cameron

No. 8979

Thomas Campbell.

(Seaforth)

Adm: 8 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries & Galloway *and his Substitutes,—*

The Petition of William James Kermode

Tong Case Isle of Man

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Florence Cellin your Petitioner's (3) Niece is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Florence Cellin to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) W. J. Kermode

DATED this Eleventh (4) day of December One thousand nine hundred and two years

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Florence Cellin.
2. Sex and Age,	Female - 24.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	assisting in the house.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	14 Finch Road - Douglas.
7. Place where Found and Examined,	2 Winds in Turner, Douglas Isle of Man
8. Length of time Insane,	two months
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	15.
(5) If patient has previously in an establishment, state name and date of latest admission or approximate thereto. If not previously under examination or treatment state that fact. 11. When and where previously under Examination and Treatment (5)	Crichton Royal Inst: February 1893.
12. Duration of Existing Attack,	about two months
13. Supposed Cause,	Shock on death of her father
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Percy Cellin 14 Finch Road Douglas Isle of Man, brother of Florence Cellin. No insanity in the family
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this tenth day of December One thousand nine hundred and two years

(*To be signed by the party applying*) W. J. Kermode

P. p.

T. & A. C.—June 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Arthur Wood being a (1) a Licentiate of the Royal College of Physicians, London and being in actual practice as a (2) physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 2 Windsor Terrace, Douglas, Isle of Man ~~in the County of~~ separately from any other Medical Practitioner, visited and personally examined (4) Florence Crellin of 14 Finch Road, Douglas Isle of Man and that the said Florence Crellin is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

She is in a more or less constant state of mental agitation. She is always on the move & tries to escape from the house. She utters incessantly the same sentence viz. "that they won't let her out & she has no home". She has no manifest delusion. Sleep is only procured by drugs

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her brother & sister say she became disturbed in her mind on the death of her father. She was the only person present at the time. She became so disorderly that the other members of the family could not live in the house with her, & the reason she is now living with strangers she cannot during sleep.

Name and Medical Designation, Thomas Arthur Wood Esq M.R.C.P. Lond; M.R.C.S. Eng.

Place of Abode, 4 Albert Terrace, Douglas, Isle of Man

DATED this Ninth day of December One thousand nine hundred and two years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of Glasgow University and Surgeon — and being in actual practice as a (2) Physician and Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Florence Crellin, Spinster 14 Finch Road, Douglas Isle of Man and that the said Florence Crellin is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She has a very depressed appearance; talks incoherently and in an unintelligible manner; cannot tell where she came from, and says she has no home —

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, 27 Castle Street. Dumfries

DATED this Eleventh day of December One thousand nine hundred and two years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Thomas Arthur Wood being (1) a Licentiate of the College of Physicians London hereby certify, on soul and conscience, that I have this day, at (2) Douglas Isle of Man in the ~~County of~~ Isle of Man., seen and personally examined Florence Crellin of 14 Finch Rd Douglas and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries (Crichton Royal Institution)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Thomas Arthur Wood

DATED this Ninth day of December One thousand nine hundred and two years

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Florence Crellin — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Uncle Thos mother wife of late father

Signature and Address W. J. Kinnoull Douglas I.o.M.

Date Dec 9th 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire (3) Honorary-Sheriff-Substitute of Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (4) William James Kermode, Douglas, Isle of Man Certificates under the hands of Thomas A. Wood, and Alex: Thomson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) Florence Crellin, 14 Finch Road, Douglas, Isle of Man (Visitors' Voice) and that the said Florence Crellin is a (6) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Florence Crellin as a Patient into the (7) Public Asylum of Crichton Royal Institution and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Florence Crellin which accompanied the said Petition.

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twelfth day of December, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

[Signature] John Clerk

(7) Public, District, Parochial, or Private.

No. 8980.

Florence Cellier.

Adm: 10 December 1902.

N.B.—*This Form shall be kept in the keeping of the Superintendent of the Asylum or the order of the Sheriff granted.*

[FORM A.]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries & Galloway, _____ *and his Substitutes,*— at Dumfries:

The Petition of Mrs Mary Watson, Newbridge, Terregles,

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates that Alexander Austin, Newbridge, Terregles, father, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Alexander Austin, _____ to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(1) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Mary Watson

(2) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificate.

DATED this 12th (2) day of Dec^r. One thousand ~~eight~~ nine hundred and two.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

Christian Name and Surname of Patient at length,	Alexander Austin.
Sex and Age,	Male. 55 years.
Married, Single, or Widowed,	widower.
Condition of Life, and previous Occupation (if any).	tailor.
Religious persuasion, so far as known,	Church of Scotland.
Previous Place of Abode,	New Bridge, Terregles.
Place where Found and Examined,	New Bridge, Terregles.
Length of Time Insane,	1 month.
Whether First Attack,	First attack.
Age (if known) on First Attack,	55.
When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	—
Duration of Existing Attack,	1 month.
Supposed Cause,	
Whether subject to Epilepsy,	No.
Whether Suicidal,	No.
Whether dangerous to others,	Yes.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs. Watson, Newbridge, Terregles, Kirkcudbrightshire. (Daughter.)
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this 12th day of Dec^r, One thousand ~~eight~~ nine hundred and two.

(To be signed by party applying) Mary Watson

89 68

MEDICAL CERTIFICATE No. I.

I, the undersigned James Williamson Martin
being a (1) M.D. F.R.C.P.Edinburgh
and being in actual practice as a (2) general practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) New Bridge Inn Dumfries
in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Alexander Austin
and that the said Alexander Austin is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is restless and gets up and talks incoherently. He stands at the window. He does not start doing to his meals. He sometimes thinks he is going to the pram. He forgets where he is. He always forgets time.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He thinks somebody is coming to take him away. He says he is going to the pram. He forgets where he is. He always forgets time.

Name and Medical Designation, James Williamson Martin M.D.
Place of abode, Burnpar + Holywood

DATED this twelfth day of December, One thousand ~~nine~~ eight hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g., Member of the Royal College of Physicians in Edinburgh.*
(2) *Physician or Surgeon, or otherwise as the case may be.*
(3) *Insert the Street, and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information and from whom derived.*

MEDICAL CERTIFICATE No. II.

I, the undersigned John Smith,
being a (1) Graduate in medicine of Edinburgh Univ
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) New Bridge Inn Dumfries
in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Alexander Austin
and that the said Alexander Austin is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
His wild excited insane appearance and actions. Swearing and talking incoherent nonsense and threatening to strike.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His daughter Mrs. Mary Watson informs that he is continually restless and excited swearing and behaving in any insane manner. Is quite unmanageable.

Name and Medical Designation, John Smith. M.D.
Place of abode, 67 Castle St. Dumfries

DATED this twelfth day of December, One thousand ~~nine~~ eight hundred and two.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g., Member of the Royal College of Physicians in Edinburgh.*
(2) *Physician or Surgeon, or otherwise as the case may be.*
(3) *Insert the Street, and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned James Williamson Martin being (1) M.D. F.R.C.P.Edinburgh. (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) New Bridge Temple, (2) State place of examination.
in the County of Kirkcudbright, seen and personally examined Alexander Austin, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum. And I further certify that the case of the said person is one of Emergency.

James W. Martin M.D.

DATED, this Twelfth day of December, One thousand ~~eight~~ nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Alexander Austin to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, daughter

Signature and Address; Mary Peter Watson Newbridge Temple

Date, Dec 12th 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire, Advocate, Sheriff Substitute of ~~the the County of~~ Dumfries and Galloway at Dumfries (1) Insert Name & Designation
having had produced to me, with a Petition at the instance of (1) Mrs Mary Watson, Newbridge, Terregles, Certificates under the hands of James W. Martin, and J. Smith, ——, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Alexander Austin, Newbridge, Terregles, (Petnrs Father), and that the said Alexander Austin, is a (3) person of unsound mind, and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Alexander Austin, as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize his Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Austin, which accompanied the said Petition. (2) Describe him, and if a pauper, state so. (3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Thirteenth day of December, One thousand ~~eight~~ nine hundred and two years.— Five words deleted.

Geo Campion

To the Superintendent of the Public Asylum of *Crichton Royal Institution for Lunatics, at Dumfries.*

No. 8981

Name, Alexander Austin

Date of Admission, 12th December 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2) Shire~~ of Dumfries & Galloway and his Substitutes,—at Dumfries

The Petition of Isabel Muirhead, High Street Romaine

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Muirhead your Petitioner's (3) mother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Muirhead to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Isabel Muirhead

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 13th (4) day of December One thousand nine hundred and Two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Margaret Muirhead
2. Sex and Age,	Female 50.
3. Married, Single, or Widowed,	Widow.
4. Condition of Life, and previous Occupation (if any),	Home wife
5. Religious Persuasion, so far as known,	Protestant (Presbyterian)
6. Previous Place of Abode,	High Street Romaine.
7. Place where Found and Examined,	High Street Romaine
8. Length of time Insane,	Four months
9. Whether First Attack,	Second attack
10. Age (if known) on First Attack,	about 44.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution
12. Duration of Existing Attack,	Four months
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	Not Epileptic
15. Whether Suicidal,	Not Suicidal
16. Whether Dangerous to others,	Not dangerous
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	=
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Isabel Muirhead, High Street, Romaine, Daughter. None known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	=

(5) If patient has been previously in an Establishment, state name and date of latest admission or approximate thereto. If not previously under Examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 13th day of December One thousand nine hundred and Two.

(To be signed by the party applying) Isabel Muirhead.

P p.

T. & A. C.—Feby. 1901.

MEDICAL CERTIFICATE, No. I.

(*) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(†) Physician or Surgeon, *or otherwise, as the case may be.*

(‡) *Insert the street and number of the house (if any), or other like particulars.*

(§) *Insert Designation and Residence, and if a Pauper state so.*

(‖) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(¶) *State the facts.*

I, the undersigned, James Alexander Adamson
being a (*) Graduate of Edinburgh University
and being in actual practice as a (†) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (‡) Keppie Street Romaine Dumfries separately from any other Medical Practitioner, visited and personally examined (§) Margaret Muirhead, and that the said Margaret Muirhead is a (‖) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (¶) General appearance & behaviour; restlessness, mantly self centred depression; delusions. Insanity.

(†) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (†)
Restlessness, delusions, expressions indicative profound melancholy; prolonged period of insanity & excitement of persons

Name and Medical Designation, J Adamson M.B., Edin.

Place of Abode, Romaine, Dumfries

DATED this thirteenth day of December One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(*) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(†) Physician or Surgeon, *or otherwise, as the case may be.*

(‡) *Insert the street, and number of the house (if any), or other like particulars.*

(§) *Insert Designation and Residence, and if a pauper state so.*

(‖) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(¶) *State the facts.*

I, the undersigned, George R. Livingston
being a (*) Bachelor of Medicine & Master in Surgery Edinburgh University
and being in actual practice as a (†) Physicians & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (‡) 47 Castle Street Dumfries separately from any other Medical Practitioner, visited and personally examined (§) Margaret Muirhead Keppie Street Romaine and that the said Margaret Muirhead is a (‖) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (¶) Her insane appearance and manner
Her restlessness
Delusions regarding broken bottle laid in the road to injure horses

(†) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (†)

Name and Medical Designation, George R. Livingston M.B.

Place of Abode, 36 George Street Dumfries

DATED this thirteenth day of December One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Alexander Adamson
being (1) Graduate of Edinburgh Univ. hereby certify, on soul and conscience, that I have this day, at (2) High Street, Dumfries, in the County of Dumfries, seen and personally examined Margaret Muirhead, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

J Addamson M.B.

DATED this fourteenth day of December One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Margaret Muirhead to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Daughter

Signature and Address Muirhead, High St. Moniaive

Date 15th Dec. 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Esquire (1) Sheriff-Substitute of the (2) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) Isabel Muirhead, High Street, Moniaive, Certificates under the hands of James Alexander Adamson and George R. Livingston being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Margaret Muirhead, Widow, High Street, Moniaive (Dumfriesshire) and that the said Mrs Margaret Muirhead is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Margaret Muirhead as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Margaret Muirhead which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Fifteenth day of December, One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 8982.

Margaret Muirhead

Adm: 13 December 1902.

Exc

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the (2)~~ of Dumfries & Galloway, and his Substitutes, at Dumfries:

The Petition of Mrs Jane D. Ward, Lady Braidvile, Rosetta Park, Belfast.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Edward Craig Ward, Commission Agent

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Charles Edward Craig Ward, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Jane Dickey Ward

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 18th (4) day of December, One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Charles, Edward, Craig, Ward.
2. Sex and Age,	Male. 31 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Commission Agent.
5. Religious Persuasion, so far as known,	Church of Ireland.
6. Previous Place of Abode,	Braidvile, Rosetta Park, Belfast.
7. Place where Found and Examined,	Belfast.
8. Length of time Insane,	More Mentally Strong but
9. Whether First Attack,	gradually worse during past 12 months.
10. Age (if known) on First Attack,	30 years of age.
11. When and where previously under Examination and Treatment (5)	~~Nil~~
12. Duration of Existing Attack,	12 months.
13. Supposed Cause,	Congenitally defective
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Jane Dickey Ward, Braidvile, No. Rosetta Park, Belfast.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has been previously in an Establishment, state name and date of latest admission or approximate thereto. If not previously under examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Sixteenth day of December, One thousand nine hundred and two years.

(*To be signed by the party applying*) Jane Dickey Ward

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John M. Macdonnac
being a (1) Doctor of Medicine of the University of Durham
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 31 Great Victoria Street, Belfast
in the County of Antrim separately from any other Medical Practitioner, visited and personally examined (4) Charles Edward Craig Ward, Commission Agent, for Coal, Blantwelle, Rosetta Park, Belfast, and that the said Charles Edward Craig Ward is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He says his fame are plotting against him that he cannot sleep, and somewhere away from his mothers house, he says he had taken medicine with the intention of poisoning himself. He is one day a Protestant & Roman Catholic. Sounds the name of Christ & Christian & the Bible, and the name of Satan & Devil in the same breath. He is excitable & impulsive

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother states that the constant thinking has to prevent his brains out. His mother says that he is uncontrollable at times & has threatened to commit suicide.

Name and Medical Designation, John M. Macdonnac, M.D.

Place of Abode, 31 Gt Victoria St. Belfast

DATED this 17th day of December One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of Edinburgh University and Surgeon
and being in actual practice as a (2) Physician and Surgeon, The Crichton Royal Institution,
do hereby certify, on soul and conscience, that I have this day, at (3) Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Charles Edward Craig Ward, Commission Agent, Knaidenlie, Rosetta Park, Belfast and that the said Charles Edward Craig Ward is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He appears depressed, and says he takes a gloomy view of everything, and that all things are going wrong: that his family have turned against him.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, 27 Carlton Street, Dumfries

DATED this Eighteenth day of December, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John M. Macbormac
being (1) a Doctor of Medicine of Durham University
hereby certify, on soul and conscience, that I have this day, at (2) Belfast
in the County of Antrim, seen and personally examined
Charles Edward Craig Ward, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries;

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

John M. Macbormac, M.D.

DATED this 12th day of December, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution, Dumfries
Asylum to receive therein Charles Edward Craig Ward,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Mother

Signature and Address Jane Dickey Ward

Date 16th December 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Esquire Advocate (1) Sheriff Substitute
of ~~the~~ (2) Dumfries and Galloway ~~of~~ at Dumfries,
having had produced to me, with a Petition at the instance of (3) Mrs Jane D. Ward, Braidnite, Rosetta Path, Belfast,
Certificates under the hands of John M. Macbormac,
and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Charles Edward Craig Ward, Commercial Agent Braidnite Belfast and that the said Charles Edward Craig Ward is a (5) person of unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charles Edward Craig Ward as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Charles Edward Craig Ward, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Nineteenth day of December, One thousand nine hundred and two years. Two words deleted.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, at Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo: Campion

No. 8983.

Charles Ed. Craig Ward.

Adm: 16 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Kirkcudbright County *of* Wigtown, Galloway *and its Substitutes*

The Petition of Alex. Heath, Inspector of Poor Leswalt Parish Glenstone, Stranraer

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexina Heron 44 High Street Stranraer your Petitioner's (3) Pauper Lunatic is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexina Heron to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) Alex Heath

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Seventeenth (4) day of December One thousand nine hundred and two years

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Alexina Heron
2. Sex and Age,	Female, Aged about 52 years
3. Married, Single, or Widowed,	Single,
4. Condition of Life, and previous Occupation (if any),	Not ascertained, She has been a boarded out Lunatic for years
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	44 High Street Stranraer
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Has been Imbecile all her life,
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	-
11. When and where previously under Examination and Treatment (5)	Never in an Asylum
12. Duration of Existing Attack,	About 6 days
13. Supposed Cause,	Unknown,
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Leswalt Parish Council.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mother Margaret Heron 44 High Street Stranraer Unknown,
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has been previously in an Establishment, state name and date of latest admission or approximation thereto. If never previously under examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Seventeenth day of December One thousand nine hundred and two years

(*To be signed by the party applying*) Alex Heath

T. & A. C.—March 1899.

P T.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, John Alexander Anderson being a (1) Doctor of Medicine of Glasgow University and being in actual practice as a (2) physician and Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) High Street, Stranraer Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Alexina Heron, High Street Stranraer, pauper and that the said Alexina Heron is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

(1) She has the facial expression, defective ideation and speech of imbecility.

(2) She is violent in behaviour at times, cursing and swearing and attacking her mother, and threatening to

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Mc Ewen, a neighbour who lives in the opposite house the street, states that the said Alexina Heron is constantly abusing her mother (Margaret Heron) and would do grievous harm to her if not intervened.

Name and Medical Designation, John Alexander Anderson

Place of Abode, 21 Lewis Street Stranraer

DATED this nineteenth day of December One thousand ~~eight~~ nine hundred and ~~two~~ years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Harper being a (1) Bachelor of Medicine & Master of Surgery of Aberdeen University and being in actual practice as a (2) physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) High Street Stranraer Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Alexina Heron Pauper High Street Stranraer and that the said Alexina Heron is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) (1) Imbecility in speech and other characteristics of such.
(2) Violent in behaviour towards her mother, cursing & swearing at her

(7) *State the information and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Mc Ewen a woman who lives in the opposite house the same house informs me that she is constantly abusing her mother in a violent manner and that she has threatened to take her own life

Name and Medical Designation, Thomas Harper

Place of Abode Harbour House Stranraer

DATED this twenty fourth day of December One thousand eight hundred and five years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, John Alexander Anderson being (1) a Doctor of Medicine of Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Bank St: Strauraer in the County of Wigtown, seen and personally examined Alexina Heron, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

John Alexander Anderson

DATED this Sixteenth day of December One thousand ~~eight~~ nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Southern Counties Asylum to receive therein Alexina Heron to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address Alexr Anderson

Date 16th December 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Cameron Esquire (1) Honorary Sheriff Substitute of the (2) Sheriffdom of Dumfries & Galloway having had produced to me with a Petition at the instance of (3) Alex Gourlie Inspector of Poor Kirkcudbright Parish Glenhouse Stranraer Certificates under the hands of John Alexander Anderson M.D. and Thomas Harper M.B. C.M. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexina Heron High Street Stranraer Grocer and that the said Alexina Heron is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexina Heron as a Patient into the Southern Counties Asylum of Dumfries and I authorize (6) this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexina Heron which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Stranraer] this seventeenth day of December One thousand ~~eight~~ nine hundred and two

To the Superintendent of the (7) Southern Counties *Asylum of* Dumfries

(7) Public, District, Parochial, or Private.

A.25

[*Signature*] John Cameron

No. 8984.

Alexina Heron.

(Leswalt)

Adm: 16 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Greenock Burgh

of Greenock *and his Substitutes*—

The Petition of Arthur Alexander Millar

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Edith Vernon Millar

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Edith Vernon Millar to the Crichton Institute, Dumfries and to sanction her admission into the said Asylum.

(To be signed by the Party applying.) Arthur A. Millar

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 13th (4) day of December One thousand nine hundred and two

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STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Edith Vernon Millar
2. Sex and Age,	21.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Residing in family.
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Bedford Street Greenock
7. Place where Found and Examined,	do do
8. Length of time Insane,	Three weeks to a month.
9. Whether First Attack,	Yes. 21.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	
13. Supposed Cause,	Mental Shock
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	none
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mother—Elizabeth Lindsay Millar Greenock — a brother.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If previously under examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 13th day of December One thousand nine hundred and two

(To be signed by the party applying.) Arthur A. Millar

T. & A. C.—June 1902. P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Broadfoot being a (1) Doctor of Medicine of the University of Glasgow and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 8 Bedford Greenock in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) Edith Vernon Millar and that the said Edith Vernon Millar is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is mechanically incapable of conversing, but rushes in rooms and disarranges the furniture. She destroys clothing and throws articles into the fire, and has attempted to escape from the house when not in a condition to dress & appear in the street. She burnishes her hair under the blankets of the bed at times.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She has used the button which unfortunately is not guarded to attack the other members of the family & altogether does not seem responsible.

Name and Medical Designation, William Broadfoot M.B. C.M.

Place of Abode, 23 Belmont - Greenock

Dated this 14th day of December One thousand nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, James Wallace being a (1) Grad. in Med. of the Univ. of Glasgow and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) No. 8 Bedford St Greenock Renfrew in the County of separately from any other Medical Practitioner, visited and personally examined (4) Edith Vernon Millar, daughter of Elizabeth Linden Millar and that the said Edith Vernon Millar is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Great restlessness - Cannot be got to answer simple questions in a rational manner - Attempts to destroy clothing, &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Has previously been in this condition for several weeks.

Name and Medical Designation, James Wallace, M.D.

Place of Abode, 6 Regent St. Greenock

Dated this fourteenth day of December One thousand nine hundred and two -

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the
Asylum to receive therein
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient,

Signature and Address

Date

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Arthur Thomson Clegg Advocate Sheriff Substitute (1)
of the Dumfries and Bute of
having had produced to me, with a Petition at the instance of (2) Arthur Alexander Millar 62 Forsyth Street Greenock
Certificates under the hands of William Broadfoot
and James Wallace being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Edith Vernon Millar — and that the said
Edith Vernon Millar is a (5) person of unsound mind;
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Edith Vernon Millar as a Patient into the (6) Private Asylum of Crichton Institute Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Edith Vernon Millar which accompanied the said Petition.

DATED [at Greenock] this Seventeenth day of December One thousand nine hundred and two

To the Superintendent of the (7) Private Asylum of Crichton Institution Dumfries

[*Signature*] A. T. Clegg

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

No. 8985.

Edith Vernon Millar.

Adm: 18 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Dumfries & Galloway *and his Substitutes,*— at Dumfries

The Petition of Wm. Ebenauf. Watchmaker. 6 Paternoster Row. Carlisle

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Ebenauf

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Ebenauf to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Wm Ebenauf

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 21th (4) day of December— One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Jane Ebenauf.
2. Sex and Age,	Female. 48.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Housewife. Teacher.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	6 Paternoster Row. Carlisle.
7. Place where Found and Examined,	Carlisle & Dumfries.
8. Length of time Insane,	One week.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	Slight attack about 11 years ago.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	One week.
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	—
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wm Ebenauf (Husband) 6 Paternoster Row. Carlisle
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Asylum, state date of latest admission or appointment thereto. If not previously under Examination or Treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 21th day of December— One thousand nine hundred and two years.

(To be signed by the party applying) Wm Ebenauf

T. & A. C.—June 1902.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Alexander Thomson — being a (1) Doctor of Medicine — and being in actual practice as a (2) Surgeon — do hereby certify, on soul and conscience, that I have this day, at (3) Bellevue Carlisle - Cumberland — in the County of — separately from any other Medical Practitioner, visited and personally examined (4) Jane Ohenauf — the said Jane Ohenauf — is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Violence in speech, manner & action. Incoherence in subject matter of conversation. Rumours eating. untidy appearance. Senseless laughter. & rough chaffing of those about her

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Nurse's conduct. rambling talks. and changed demeanour.

Name and Medical Designation, A A Ledward

Place of Abode, Carlisle

DATED this 23 day of December One thousand nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so,*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Alexander Thomson — being a (1) Doctor of Medicine of Glasgow University and Surgeon — and being in actual practice as a (2) Physician and Surgeon — do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries — in the County of — separately from any other Medical Practitioner, visited and personally examined (4) Jane Ohenauf. Housewife. 6 Paternoster Row, Carlisle — and that the said Jane Ohenauf — is a (5) person of unsound mind, and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is in a state of acute Maniacal Excitement:- tossing about in the most violent manner; screaming and talking quite incoherently -

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 27 Castle St, Dumfries

DATED this Twenty seventh day of December One thousand nine hundred and two years -

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Henry Ambrose Lediard being (1) a doctor of medicine, hereby certify, on soul and conscience, that I have this day, at (2) Dalbeattie in the County of Cumberland, seen and personally examined Jane Abenauf, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

H A Lediard

DATED this 23rd day of December One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Jane Abenauf to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband

Signature and Address Wm Abenauf Sr

Date 24th December 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Leck Esquire, Honorary (1) Sheriff-Substitute of Dumfries and Galloway, sitting at Dumfries, having had produced to me, with a Petition at the instance of (2) William Abenauf, Watchmaker, Paternoster Row, Carlisle, Certificates, under the hands of Henry Ambrose Lediard and Alexander Thompson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Abenauf, Paternoster Row, Carlisle. (Petitioner's Wife) and that the said Jane Abenauf is a (5) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Abenauf as a Patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Abenauf which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries] this Twenty-seventh day of December, One thousand nine hundred and two years.

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries

[Signature] Gr Clerk

(6) Public, District, Parochial, or Private.

No. 8986

Mrs. Jane Ebenauf.

Adm: 24 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward. (*) Shire or Stewartry.

Unto the Honourable the (*) Sheriff of ~~the (*)~~ Dumfries ~~&~~ and Galloway and his Substitutes,— at Dumfries

The Petition of Samuel T. Gordon, Surgeon to the Royal Irish Constabulary at Dublin

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Fannie Sophie Louise Gordon your Petitioner's (*) sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Fannie Sophie Louise Gordon to the Crichton-Royal Institution and to sanction her admission into the said Asylum.

(*) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) S. T. Gordon

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty fourth (*) day of December One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Fannie Sophia Louise Gordon
2. Sex and Age,	Female 50 years
3. Married, Single, or Widowed,	Spinster
4. Condition of Life, and previous Occupation (if any),	None.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	13 Heume St.
7. Place where Found and Examined,	Clarkmat Hospital (Old
8. Length of time Insane,	Hoshean Eccanha since 17/8/89)
9. Whether First Attack,	Do.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (†)	Fairlam Asylum - Fingland
12. Duration of Existing Attack,	
13. Supposed Cause,	Influenza
14. Whether subject to Epilepsy,	NO
15. Whether Suicidal,	NO
16. Whether Dangerous to others,	NO
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	(Maria Par
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Samuel T. Gordon. R.I.C. Depot Brother Fair Carson Rosse.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(†) If patient has been previously in an Establishment, state name and date of latest admission or appearance thereto. If never previously under Examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 24th day of December One thousand nine hundred and two

(To be signed by the party applying) S. T. Gordon

T. & A. C.—June 1902. P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Cuthbert Norman being a (1) Fellow of the Royal College of Physicians and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 86 Private Charlemont Street in the County of the City of Dublin separately from any other Medical Practitioner, visited and personally examined (4) Miss Fannie S. L. Gordon and that the said Miss Fannie S. L. Gordon is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her manner was extremely depressed although she declared herself as cheerful & happy. Thought quarrelled & even acute in reply she was, time & time insolent & where left to herself in conversation she admitted she believes that her Landlady put poison in her tea & she can see no reason for this belief.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Cuthbert Norman M.D.

Place of Abode, 47 Dorset Mews North Circular Road

Dated this twenty second day of December One thousand nine hundred and two

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Katharine Maguire being a (1) ~~Doctor of Medicine~~ Royal. University of Ireland and being in actual practice as a (2) physician do hereby certify, on soul and conscience, that I have this day, at (3) 86 Private Charlemont Street in the County of the City of Dublin separately from any other Medical Practitioner, visited and personally examined (4) Miss Fannie S. L. Gordon and that the said Miss Fannie S. L. Gordon is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She believes that she stated in conversation that she is receiving something pleasant that peppers she is receiving through my influence that I arrange the seats that she sleeps in church and the people stare at her. She is not at all. She is at times excitement. She is quite quiet & rational when she is not under the influence of poison. She is at times excitement. She is quite quiet & rational when she is not under the influence of poison.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) at my house by her landlady & Miss Gordon herself.

Name and Medical Designation, Katharine Maguire M.D.

Place of Abode, 67 Merrion Square North

Dated this twenty third day of December One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Katharine Maguire
being (1) Medical Doctor Royal University of Ireland
hereby certify, on soul and conscience, that I have this day, at (2) Richmond Street
in the County of The city of Dublin, seen and personally examined
Miss Fannie Sophie Louise Gordon, and that the said
person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries.

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

Katharine Maguire

DATED this twenty Third day of December — One thousand nine hundred and Two

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution Asylum to receive therein Miss Fannie Sophie Louise Gordon to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address S. T. Gordon R.I.C. Depot

Date 24th December 1902

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Esquire, Honorary Sheriff Substitute of ~~the~~ (1) Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (2) Samuel T. Gordon, Royal Irish Constabulary Depot, Phoenix Park, Dublin, Certificates under the hands of Connolly Norman and Katharine Maguire being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Fannie Sophia Louise Gordon, Charlemont Street Private Hospital, Dublin, and that the said Fannie Sophia Louise Gordon is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Fannie Sophia Louise Gordon as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Fannie Sophia Louise Gordon which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries,] this Twenty seventh day of December One thousand nine hundred and Two years. One word deleted.

To the Superintendent of the (1) Public *Asylum of* Crichton Royal Institution, Dumfries.

[Signature] Jno Clerk

(1) Public, District, Parochial, or Private.

No. 8984.

Jannie Sophia L. Gordon

Adm: 9th December 1902.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum after the order of the Sheriff is obtained.*

[FORM A.]

25 and 26 Vict., Cap. 54, Sec. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO THE CRICHTON ROYAL INSTITUTION.

Unto the Honourable the Sheriff of Dumfries and Galloway, ——— *and his Substitutes,—* at Dumfries:

The Petition of Thomas Lennox, 13 St Michael Street, Dumfries, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Mary Waddington or Lennox, your Petitioner's (1) Wife, ——— is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Mary Waddington or Lennox, ——— to the Crichton Royal Institution at Dumfries, and and to Sanction her admission into the said Institution.

(1) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Thomas Lennox

(2) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificate.

DATED this 29th (2) day of December, One thousand nine ~~eight~~ hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Waddington or Lennox.
2. Sex and Age,	Female. 29 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any).	Housewife.
5. Religious persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	13 St. Michael Street, Dumfries.
7. Place where Found and Examined,	No. Fourth.
8. Length of Time Insane,	Do.
9. Whether First Attack,	Crichton Royal Institution. June 1902.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	—
12. Duration of Existing Attack,	No
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	—
16. Whether dangerous to others,	Thomas Lennox (Husband) 13 St. Michael St. Dumfries.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify that to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of December, One thousand nine ~~eight~~ hundred and two years.

(To be signed by party applying) Thomas Lennox

MEDICAL CERTIFICATE No. I.

I, the undersigned Hugh Cunningham, ——— being a (1) Licentiate of the Royal College of Physicians in Edinburgh, and M. D. University of Brussels, ——— and being in actual practice as a (2) Physician and Surgeon — do hereby certify, on soul and conscience, that I have this day, at (3) 13 Saint Michael Street, Dumfries, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Mary Waddington or Lennox, Housewife, 13 Saint Michael Street, Dumfries, ——— and that the said Mary Waddington or Lennox, ——— is a (5) person of unsound mind, ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise as the case may be.

(3) *Insert the Street, and number of the house, (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

1. Facts indicating Insanity observed by myself: (6)
She talks ramblingly, and her facial expression indicates mental disorder.

(6) *State the facts.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband, Thomas Lennox, informs that that her manner is strange and that her conversation is confused. Also that she was in an Asylum under treatment previously.

(7) *State the information and from whom derived.*

Name and Medical Designation, Hugh Cunningham M.D. L.R.C.P.
Place of abode, 25 Castle Street Dumfries

DATED this twenty seventh day of December —One thousand ~~eight~~ Nine hundred and two years.

MEDICAL CERTIFICATE No. II.

I, the undersigned Peter Murray Rees, ——— being a (1) Bachelor of Medicine & Master in Surgery of the University of Edinburgh, ——— and being in actual practice as a (2) General Practitioner, hereby certify, on soul and conscience, that I have this day, at (3) 13 St Michael Street, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Waddington or Lennox Housewife. 13 St Michael Street, Dumfries, and that the said Mary Waddington or Lennox, ——— is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise as the case may be.

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

1. Facts indicating Insanity observed by myself: (6)
Her insane appearance & manner. She is incoherent in speech, has delusions about a new language which she says is being brought out.

(6) *State the facts*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

(7) *State the information and from whom derived.*

Name and Medical Designation, Peter Murray Rees M.B.
Place of abode, 20 Castle Street Dumfries

DATED this twenty ninth day of December One thousand ~~eight~~ Nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding Three days without any Order by the Sheriff).

I, the undersigned Hugh Cunningham, being (1) A Licentiate of the Royal College of Physicians in London M.D. Brussels, — hereby certify, on soul and conscience, that I have this day, at (2) 13 Saint Michael street, Dumfries, in the County of Dumfries, —, seen and personally examined Mary Waddington or Lennox, —, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum. And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.

(2) State place of examination.

Hugh Cunningham M.D. L.R.C.P.

DATED, this twenty seventh day of December, One thousand ~~eight~~ nine hundred and two years.-

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Institution at Dumfries, to receive therein Mary Waddington or Lennox, to whom the foregoing certificate of emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband.

Signature and Address, Thomas Lennox 13 St Michael Street Dumfries

Date, 27 December, 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Esquire, — Honorary Sheriff Substitute of ~~the the County of~~ Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (1) Thomas Lennox, 13 St Michael Street, Dumfries, Certificates under the hands of Hugh Cunningham, and Peter Murray, Esqrs., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (2) Mary Waddington or Lennox, 13 St Michael Street, Dumfries (Petner's Wife) and that the said Mary Waddington or Lennox is a (3) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Mary Waddington or Lennox as a Patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorize her Transmission to the said Institution accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Waddington or Lennox, which accompanied the said Petition.

(1) Insert Name & Designation

(2) Describe Idiot, and if a Pauper, state so.

(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Twenty ninth day of December One thousand ~~eight~~ nine hundred and two years.- Five words deleted

John Clerk

To the Superintendent of the Public Asylum of *Crichton Royal Institution for Lunatics, at Dumfries.*

No. 8988

Name, Mary Waddington of Lennox

Date of Admission, 24 December 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway, — *and his Substitutes,* — at Dumfries.

The Petition of Robert K. Crawford, 31 Wellington Road. Dublin,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Dora Minnie Helen Crawford, your Petitioner's (3) Wife,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Dora Minnie Helen Crawford, — to the Crichton Royal Institution — and to sanction her admission into the said Asylum.

(To be signed by the Party applying) R. K. Crawford

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of December — One thousand nine hundred and two years. —

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Dora Minnie Helen Crawford.
2. Sex and Age,	Female - 34 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	None - Lady.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	31 Wellington Road. Dublin.
7. Place where Found and Examined,	Dumfries.
8. Length of time Insane,	—
9. Whether First Attack,	Second attack.
10. Age (if known) on First Attack,	33 years.
11. When and where previously under Examination and Treatment (1)	Crichton Royal Inst: August 1901.
12. Duration of Existing Attack,	—
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	R. K. Crawford. 31 Wellington Rd. Dublin - (Husband)
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

If patient has been previously in an Establishment, state name and date of latest admission or application thereto. If never previously under examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 28th — day of December — One thousand nine hundred and two years.

(To be signed by the party applying) R. K. Crawford

P. p.

T. & A. C.—June 1902.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Thomson —— being a (1) Doctor of Medicine of Glasgow University and Surgeon —— and being in actual practice as a (2) Physician & Surgeon —— do hereby certify, on soul and conscience, that I have this day, at (3) 27, Castle Street, Dumfries, —— in the County of Dumfries, —— separately from any other Medical Practitioner, visited and personally examined (4) Mrs Dora Minnie Helen Crawford wife of R. R. Crawford, 31 Wellington Road, Dublin, and that the said Dora Minnie Helen Crawford, is a (5) Person of unsound mind, —— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her insane appearance and manner: talks incoherently about where she has been, what she has seen, and what she has been doing.—

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, } Alex. Thomson M.D.

Place of Abode, 27 Castle St., Dumfries

DATED this twenty-eighth day of December, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander Duff Macdonald —— being a (1) Graduate of Edinburgh University, Physician & Surgeon, —— and being in actual practice as a (2) Physician & Surgeon, —— do hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Asylum, Dumfries, —— in the County of Dumfries, —— separately from any other Medical Practitioner, visited and personally examined (4) Dora Minnie Helen Crawford of Wellington Road Dublin, —— and that the said Dora Minnie Helen Crawford is a (5) Person of unsound mind, —— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) is Very excited appearance and rambles incoherently all subjects mine especially what she has been doing recently. Has an excited manner.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Has been in the asylum a year ago.

Name and Medical Designation, } A. Duff Macdonald M.D.

Place of Abode, 18 Castle St Dumfries

DATED this 29th day of Dec. —— One thousand nine hundred and two.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson being (1) a doctor of medicine, hereby certify, on soul and conscience, that I have this day, at (2) 27 Castle St, Dumfries in the County of Dumfries, seen and personally examined Dora Minnie Helen Crawford, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) The Crichton Royal Institution, Dumfries.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson, M.D.

Dated this twenty-eighth day of December, One thousand nine hundred and two years.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Dora Minnie Helen Crawford. to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband.

Signature and Address R. K. Crawford
Date 28-12-02. 31 Wellington Rd Dublin

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Esquire, Honorary Sheriff-Substitute of the (1) Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (2) Robert K. Crawford, 31 Wellington Road, Dublin Certificates under the hands of Alexander Thomson and Alexander Dall MacDonald being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3)—Dora Minnie Helen Crawford, 31 Wellington Road, Dublin (Pt's Wife) and that the said Dora Minnie Helen Crawford, is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Dora Minnie Helen Crawford as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Dora Minnie Helen Crawford— which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

Dated [at Dumfries] this Thirtieth day of December One thousand nine hundred and two years. One word deleted.

To the Superintendent of the (1) Public Asylum of Crichton Royal Institution Dumfries.

[Signature] Jno Clerk

(1) Public, District, Parochial, or Private.

No. 8989.

Anna Winnie Helen Crawford.

Adm: 28 December 1908.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Ayr *and his Substitutes,*—

The Petition of James M'Christie Grain Merchant and Farmer, Laundalina South Beach Road, Ardrossan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Thomson or Christie your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Thomson or Christie to the Crichton Royal Asylum, Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(*To be signed by the Party applying*) James M Christie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty fourth (4) day of December One thousand nine hundred and two

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Mary Thomson or Christie
2. Sex and Age,	Female — Forty four
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Middle class. no occupation
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Ardrossan
7. Place where Found and Examined,	ditto
8. Length of time Insane,	about five months
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	Forty four
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	one month
13. Supposed Cause,	change of life
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Marshall Christie husband of said Mary Thomson or Christie no one ever known to have been of unsound mind
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has been previously in an Establishment, state name and date of latest admission or approximation thereto. If not previously under examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 23rd day of December One thousand nine hundred and two

(*To be signed by the party applying*) James. M. Christie

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the cases may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robt Allan
being a (1) Doctor of medicine
and being in actual practice as a (2) Jenner Medical practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Laurieston South Beach Road, Ardrossan in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Mrs Mary Thomson or Christie wife of Mr James M. Christie and that the said Mrs Mary Christie is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She states that everybody is against her that she & her p[arents] are "dismissed" that the shipbuilding yards sunk [illegible] into the house & that Scotland is [illegible] of the house.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Nurse Janet Craigie who has been in charge of the patient for the last three months, states patient's she sees & hears people coming into the house when there none that she now talks intelligently & rational & that she never undresses. She tried a cord round her throat none present.

Name and Medical Designation, Robt Allan, Medical [illegible]

Place of Abode, Ardrossan

DATED this twenty second day of Dec[r] One thousand nine hundred and two.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Wallace
being a (1) Graduate of St Andrews
and being in actual practice as a (2) General Medical Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Laurieston South Beach Road Ardrossan in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Wm Mary Thomson or Christie wife of Mr James Christie and that the said Wm Mary Christie is a (5) person of unsound mind. and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
On going into the room Mrs Christie tried to [illegible] behind a press door — then tried to get out of the room and afterwards walked up & down the room [illegible] her hands and appeared to be in a very depressed state of mind — would not speak or answer any questions

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her daughter & nurse found her with a cord round her neck
Miss Craigie past nurse has been in attendance for the last 3 months informed me that the patient has become more unmanageable — very impulsive at times — likely to do herself harm — has attempted to strangle herself — left alone of her children — Her husband tells me that because of the loss of her sisters & brother in America could help to account for insanity

Name and Medical Designation, Robert Wallace M.D.

Place of Abode, 12 Hamilton Street Saltcoats

DATED this twenty third day of December One thousand nine hundred and two years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined , and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3)

And I further certify that the case of the said person is one of Emergency.

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

DATED this day of One thousand nine hundred and

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Asylum to receive therein to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, ____

Signature and Address ____

Date ____

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David James Mackenzie (1) Esquire Advocate, Sheriff Substitute of the (2) Stewartry of Ayr having had produced to me, with a Petition at the instance of (3) James Marshall Grocer, Grain Merchant and Farmer, Lumsdna, South Broad Ledmanagh Certificates under the hands of Dr. Robert Allan, Ardrossan and Robert Wallace, Saltcoats being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Thomson or Christie, Ardrossan and that the said Mary Thomson or Christie is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Thomson or Christie as a Patient into the (6) Crichton Royal Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Thomson or Christie which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Kilmarnock] this twenty fourth day of December One thousand nine hundred and two

To the Superintendent of the (7) Royal Asylum of Crichton Humfries

[Signature] David J. Mackenzie

(7) Public, District, Parochial, or Private.

No. 8990

Mary Thomson or Christie

Adm: 29 December 1902.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes,* — at Dumfries:

The Petition of Joseph Reddan, 98 Grosvenor Road, Newcastle-on-Tyne,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Alice Harrison

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Wife's neice, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alice Harrison to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Joseph Reddan

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 30th (4) day of December, — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Alice Harrison.
2. Sex and Age,	Female - 49 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Lady.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Crown Street. Newcastle on Tyne.
7. Place where Found and Examined,	Do. Do.
8. Length of time Insane,	Twenty years.
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	29 years.
11. When and where previously under Examination and Treatment (5)	Dunston Lodge Private Asylum, Gateshead 20 years ago.
12. Duration of Existing Attack,	One month.
13. Supposed Cause,	Previous attacks.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Miss Maria Blacket. 98 Grosvenor Road. Newcastle. - Aunt.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Establishment, state name and date of latest admission or approximation thereto. If not previously under examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 29th day of December, — One thousand nine hundred and two years.

(To be signed by the party applying) Joseph Reddan

T. & A. C.—June 1902. P. p.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Henry Spurgin, being a (1) Member of Royal College of Surgeons and being in actual practice as a (2) Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 31 Grosvenor Street Gateshead, — in the County of Northumberland, separately from any other Medical Practitioner, visited and personally examined (4) Alice Harrison, 21 Grosvenor St Gateshead, and that the said Alice Harrison, is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Melancholia - Inebriate - Fits of Violence - Delusions - (e.g. Neighbours conspiring agst her).

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Threw cup at Nurse - Knows Nurse's name - Threats to murder People - Sees fantastic objects on walls &c

Name and Medical Designation, W. H. Spurgin M.R.C.S. L.R.C.P.

Place of Abode, Newcastle on Tyne

DATED this 24th day of December, One thousand nine hundred and two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of Glasgow, Edinburgh and Durham Universities and Surgeon, and being in actual practice as a (2) Physician and Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution, Dumfries, — in the County of Dumfries, — separately from any other Medical Practitioner, visited and personally examined (4) Alice Harrison, Spinster 31 Grosvenor Street, Newcastle-on-Tyne — and that the said Alice Harrison — is a (5) person of unsound mind, — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her nervous Condition, and the way in which she talks about herself: States that she became so nervous that she rushed out of her house in the middle of the night in an almost naked Condition, and went to a neighbour's house: has a dread that something is about to happen

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alex Thomson M.D.

Place of Abode, 27 Castle Street, Dumfries

DATED this Thirtieth day of December, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Rutherford
being (1) a Fellow of the Royal College of Physicians
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries
in the County of Dumfries, seen and personally examined
Alice Harrison, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries:

(1) State medical qualification.
(2) State place of examination.

And I further certify that the case of the said person is one of Emergency.

(3) State place at which Asylum is situated.

James Rutherford

DATED this twenty ninth day of December — One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal Asylum to receive therein Alice Harrison — to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Aunt's Husband.

Signature and Address Joseph Rodden, 28 Grosvenor Road, Newcastle-on-Tyne.

Date 29th December 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary Sheriff-Substitute of the (1) ~~Dumfries~~ and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Joseph Rodden, 28 Grosvenor Road, Newcastle-on-Tyne, Certificates under the hands of William Henry Spurgin and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (3) Alice Harrison, Brown Street, Newcastle-on-Tyne (Patient's place) and that the said Alice Harrison, is a (4) person of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alice Harrison as a Patient into the (5) Public Asylum of Crichton Royal Institution, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alice Harrison, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(3) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, Parochial, or Private.

DATED [at Dumfries] this Thirtyfirst day of December, One thousand nine hundred and two years. (One word deleted.

To the Superintendent of the (6) Public. *Asylum of* Crichton Royal Institution, Dumfries.

(6) Public, District, Parochial, or Private.

[*Signature*] John Clerk

No 8991.

Alice Harrison.

Adm: 29 December 1902

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) Dumfries & Galloway — *and his Substitutes,* — of Dumfries:

The Petition of Robert Andrew Hawthorn Urquhart, 25 Clarement Road, Redruth, Cornwall.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Sarah Comrie Urquhart, —

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) aunt, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Sarah Comrie Urquhart, — to the Crichton Royal Institution, — and to sanction her admission into the said Asylum.

(To be signed by the Party applying) R. A. H. Urquhart

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of December — One thousand nine hundred and two years.

STATEMENT.

If any of the Particulars in this Statement be not known, the fact to be so stated.

1. Christian Name and Surname of Patient at length,	Sarah Comrie Urquhart.
2. Sex and Age,	Female. 63 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	—
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	33 Woodburn Terrace, Edinr.
7. Place where Found and Examined,	
8. Length of time Insane,	about 7 or 8 years.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	about 56.
11. When and where previously under Examination and Treatment (5)	at Morton House under control from July 1902, to October 1902.
12. Duration of Existing Attack,	7 or 8 years.
13. Supposed Cause,	Probably a Carriage Accident
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no, not so far as Known.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known); and whether any Member of Family known to be or to have been Insane,	Elizabeth Urquhart, c/o Miss Hawthorn, Glenluce, Wigtonshire. (sister to the patient) no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Establishment, state name and date of latest admission or approximation thereto. If never previously under examination or treatment, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of December — One thousand nine hundred and two years.

(To be signed by the party applying) R. A. H. Urquhart

T. & A. C.—June 1902.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Frank Hitchens,
being a (1) Physician & Surgeon
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 25 Clarence St
Redruth, Cornwall, in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Miss Sarah Connie Urquhart
and that
the said Miss Sarah Connie Urquhart, is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Says she has continually a thought a voice prompting her to do certain things - to be off - to go away - the voice made her leave the last home she brought her here on now making her go away again it prompted her the other day to buy things for lunch although they were not wanted. She felt she must do what the voice say-

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Urquhart - Father - has had delusions off & on in last 5 years - been in a mental home from last Jul until October when she came here - 5 Clarence - Monday last began talking about unpronounceable delusion now is that a man is trying to [illegible] her, changing her clothes - never away from the last week or so am told by Mr Urquhart -

Name and Medical Designation, Frank Hitchens MD BS Lond DPH

Place of Abode, Redruth Cornwall

DATED this 20th day of December, One thousand nine hundred and (2) two years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Arthur Edward Permewan
being a (1) Physician and Surgeon Doctor of Medicine
and being in actual practice as a (2) Physician & Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 25 Clarence
Redruth, in the County of
Cornwall, separately from any other Medical Practitioner,
visited and personally examined (4) Miss Sarah Connie Urquhart,
and that
the said Miss Sarah Connie Urquhart is a (5) person of
unsound mind, and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Tells me that there is a voice which continually prompts her to do certain things - for instance that she must leave this place. It was this that induced her to leave her last home. It influences her in writing letters and in many other things.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Urquhart (the father) confirms the above. He states that this delusion has lasted for some years. At times she writes letters which are pure nonsense. The last intimation of mental trouble was an unpleasant letter for a man to whom she wrote absurd letters.

Name and Medical Designation, Arthur Permewan M.D. (Lond)

Place of Abode, Redruth - Cornwall

DATED this 29th day of December, One thousand nine hundred and two years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days without any Order by the Sheriff.)

I, the undersigned, James Rutherford being (1) a fellow of the Royal College of Physicians hereby certify, on soul and conscience, that I have this day, at (2) Dumfries in the County of Dumfries, seen and personally examined Sarah Comrie Urquhart, and that the said person is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a sufficiently good state of bodily health at this date to be removed to the Asylum at (3) Dumfries

(1) State medical qualification.
(2) State place of examination.
(3) State place at which Asylum is situated.

And I further certify that the case of the said person is one of Emergency.

James Rutherford

DATED this thirtieth day of December One thousand nine hundred and two.

(The following should be filled up in every case in which a Certificate of Emergency is acted on.)

I hereby request the Superintendent of the Crichton Royal.

Asylum to receive therein Sarah Comrie Urquhart to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Nephew.

Signature and Address F. A. C. Urquhart 25 Claremont Road Redruth Cornwall

Date 30th December 1902.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk Honorary — Sheriff Substitute of the (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) Robert Andrew Hawthorn Urquhart, 25 Claremont Road Redruth, Cornwall Certificates under the hands of Frank Hichens, and Arthur Edward Petherbridge being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Sarah Comrie Urquhart, 25 Claremont Road, Redruth Cornwall Britain Europe and that the said Sarah Comrie Urquhart, is a (5) person of unsound mind, and a proper Person to be detained and taken care of; DO HEREBY AUTHORISE you to receive the said Sarah Comrie Urquhart as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Sarah Comrie Urquhart, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED [at Dumfries,] this thirtieth day of December One thousand nine hundred and two years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution at Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Sheriff

No. 8992.

Sarah Carrie Urquhart

Adm: 30 December 1902.

