Sheriff's Warrants

Publication/Creation

1905

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DGH1/5/1/1/68/1

4892
ad 24 May 1905

No. 6,054.

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 L O U I S A B E L L,---------- 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 22 November, 1908.

Commissioner in Lunacy.

Dated at Edinburgh, this Twenty-second, day of May, One Thousand Nine Hundred and Eight.

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—11-05

25 and 26 Vict. Cap. 54, Sect. 16.

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 e 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.)

No. 9442 Eleanor Shannon (Application)
19th Dec. 1911 to 19th June 1912.

CH1/5/1/1/58/2

No. 6561

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 Mrs Eleanor Shannon 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 19th June, 1912.

Hamilton C. Shaw

Commissioner in Lunacy.

Dated at Edinburgh, this Nineteenth day of December One Thousand Nine Hundred and Eleven.

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

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.)

DGH1/6/1/1/58/3

9442
ad. 21 August 1905

No. 6350.

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 Mrs. Eleanor Shannon 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 31st December, 1910.

John Macpherson
Commissioner in Lunacy.

Dated at Edinburgh, this Thirteenth day of July One Thousand Nine Hundred and Ten.

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

25 *and* 26 *Vict. Cap.* 54, *Sect.* 16.

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 e 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
9442 Ann Eleanor Blaxon.
13th July to 31st December 1910.

DGH1/5/

DGH1/5/1/1/58/4

9475
od. 5 October 1905

No. 6298.

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 Helen Rogers----------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 31st July-------1910.

John Macpherson
Commissioner in Lunacy.

Dated at Edinburgh, this EIGHTEENTH day of FEBRUARY One Thousand Nine Hundred and TEN.

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

9442 Rec. Asylum Mgmt.
Probation
13th July to 31st December 1910.

25 and 26 Vict. Cap. 54, Sect. 16.

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.)

DGH/5/1
9415 Miss Rogers
18th February to 31st July 1910

9500 Samuel Pickering. Probation.
25th. October 1913 to 25th. October 1914.
No. 6836.

DGH1/5/1/1/58/5

od. 15 November 1905

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 Samuel Pickering 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 25th October 1914

John Macpherson
Commissioner in Lunacy.

Dated at Edinburgh, this 25th day of October

One Thousand Nine Hundred and Thirteen.

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.

(43) Wt 6202-314 1000 1/13 M & G Ltd

9415 Probation
Stella Rogers
18th February to 21st July 1910

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.

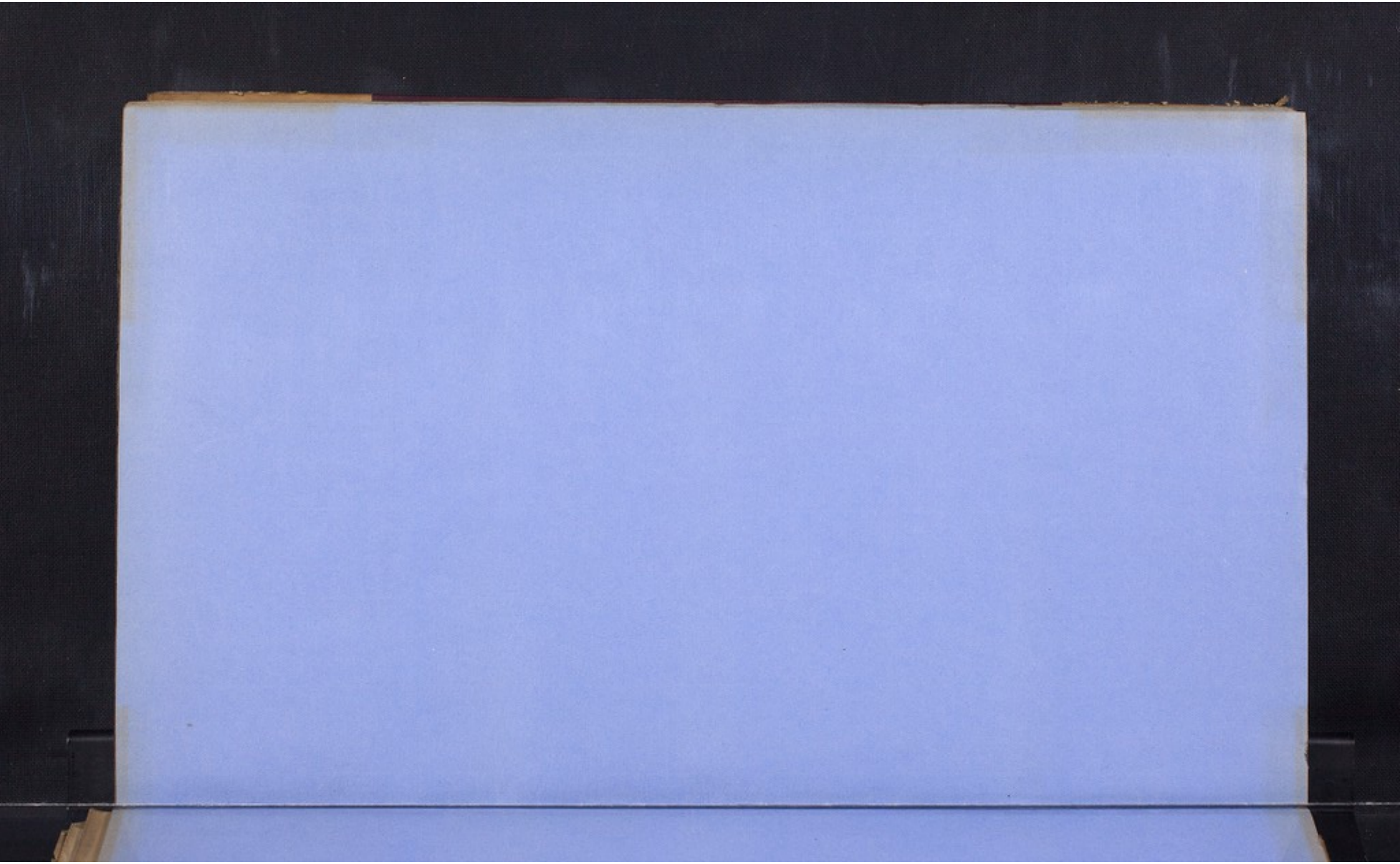
8. When a Patient on Probation, whether Private or Pauper, is certified recovered during the currency of the probationary period, a notice similar to what is required in the case of Lunatics in Private Dwellings under the Board's permanent sanction should at once be sent to the Board, and also to the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

DGHI/5/1/1/58



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 ~~James Dumfries~~ Andrew Underwood, Kingholm Farm, Dumfries,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that David Underwood, Kingholm Farm, Dumfries, your Petitioner's (1) 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 authorise the transmission of the said David Underwood Kingholm Farm, Dumfries, 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) Andrew Underwood

DATED this ~~twelfth~~ eleventh day of (2) January, One thousand ~~eight~~ nine hundred and five.

(2) The date of the Petition must be within fourteen clear days following 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,	David Underwood.
2. Sex and Age,	Male. 61.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any).	Farmer.
5. Religious persuasion, so far as known,	Established Church.
6. Previous Place of Abode,	Kingholm Farm, Dumfries.
7. Place where Found and Examined,	Kingholm Farm, Dumfries.
8. Length of Time Insane,	Seven days.
9. Whether First Attack,	Second Attack.
10. Age (if known) on First Attack,	61.
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, 13th August, 1904.
12. Duration of Existing Attack,	Seven Days.
13. Supposed Cause,	None 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,	—
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,	Andrew Underwood. Kingholm Farm, Dumfries, a brother was 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 Eleventh day of January, One thousand ~~eight~~ nine hundred and five.

(To be signed by party applying) Andrew Underwood

MEDICAL CERTIFICATE No. I.

I, the undersigned George R. Livingston ——— being a (1) Doctor of Medicine 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) Kinghohn Farm, Dumfries, ——— in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mr David Underwood Kinghohn Farm ——— and that the said Mr David Underwood, ——— is a (5) Person of Unsound 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 manner & appearance.
His incoherent & rambling conversation.
His violent actions striking out at everyone.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His brother Mr Andrew Underwood Kinghohn Farm tells me he has made several attempts to get out at the window.

Name and Medical Designation, George R. Livingston M.B.
Place of abode, 47 Castle Street Dumfries.

DATED this eleventh day of January One thousand eight hundred and nine.

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

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

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

(4) *Insert 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 Robert H. Watt, ——— being a (1) Bachelor of Medicine & Bachelor of Surgery of University of Edinburgh and being in actual practice as a (2) Physician, ——— 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) David Underwood, — of Kinghohn Farm, ——— and that the said David Underwood, ——— is a (5) Person of Unsound 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 incoherent nonsense, is very violent in his actions, throws his arms about violently, strikes out at everyone, & has an insane appearance.

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

Name and Medical Designation, Robert H. Watt M.B.Ch.B.
Place of abode, Dumfries & Galloway Royal Infirmary

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

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

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

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

(4) *Insert 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 George Robert Livingston — being (1) Doctor of Medicine of Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) Kingholm Farm, Dumfries, — in the County of Dumfries, seen and personally examined David Underwood, —, 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 qualifications.
(2) State place of examination.

George R. Livingston M.D.

DATED, this Eleventh day of January, one thousand ~~eight~~ 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 at Dumfries, to receive therein David Underwood, — to whom the foregoing certificate of emergency refers.

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

Signature and Address, Andrew Underwood, Kingholm

Date, 11 January 1905 Dumfries.

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

I, George Lampson, 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) Andrew Underwood, Kingholm Farm, Dumfries, — Certificates under the hands of George Robert Livingston, — and Robert H. 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 (2) David Underwood, Kingholm Farm, Dumfries, (Peter's brother) — and that the said David Underwood, 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 David Underwood, — 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 David Underwood, — 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 Thirteenth day of January — One thousand ~~eight hundred and~~ nine hundred and five years. Seven words deleted.

Geo. Lampson

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9835.

Name, David Underwood.

Date of Admission, 11th January 1905

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 of ~~Dumfries~~ and his Substitutes, ~~at Dumfries~~.

The Petition of Samuel Dickson Morrison, Inspector of Poor, Whithorn,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that William Little, 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 Little, to the Southern Counties Asylum, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) S. D. Morrison

(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 five 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 Little.
2. Sex and Age,	M. 27 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farm labourer.
5. Religious Persuasion, so far as known,	Prot.
6. Previous Place of Abode,	Whithorn.
7. Place where Found and Examined,	Do.
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,	—
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Not at present.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Whithorn.
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 Little, Whithorn. Father. 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 and 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 thirteenth day of January, One thousand nine hundred and five years.

(To be signed by the party applying) S. D. Morrison

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Hanney Douglas,
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) High Street
Whitburn, in the County of
Lingtown, separately from any other Medical Practitioner,
visited and personally examined (4) William Little, a pauper,
and that
the said William Little, is a (5) person of
unsound 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 two men are continually troubling him by reading his thoughts and flashing a Rays in his eyes while he is at

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
work, and also during the night.

Name and Medical Designation, J. H. Douglas M.B.C.
Place of Abode, Whitburn. Lingtownship
Dated this thirtieth day of January One thousand
nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert 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 and master of Surgery of
Edinburgh University and General practitioner
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3) Whitburn,
in the Parish of Whitburn, in the County of
Lingtown, separately from any other Medical Practitioner,
visited and personally examined (4) William Little, Labourer,
pauper,
and that
the said William Little, is a (5) person of
unsound 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 complains of people following him about & reading his thoughts with radium.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Police Sergeant Pirie Whitburn informes me that he came to the police station saying that he might aspire protection from people tormenting him

Name and Medical Designation, James F. Smith M.B.
Place of Abode, Whitburn
Dated this thirtieth day of January One thousand
nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street, and number of the house (if any), or other like particulars.*
(4) *Insert 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, George Campion, Advocate, (1) Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Samuel Dickson Morrison, Inspector of Poor, Whithorn, Certificates under the hands of John Hannay Douglas, and James Fleming 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 Little, Farm Labourer, Whithorn, Pauper, and that the said William Little, 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 William Little as a Patient into the (6) Public Asylum of Southern Counties, 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 Little, 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 January, One thousand nine hundred and five years.

To the Superintendent of the (7) Public
Asylum of Southern Counties,
Dumfries.

[*Signature*] Geo. Campion

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

No. 9336.

William Little.
(Whithorn)
Adm: 13 January 1905.

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 Ernest Victor Longworth, 4 Hume Street, Dublin.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Frederick A. Longworth, 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 Frederick A. Longworth, — to the Crichton Royal Institution, Dumfries, N.B. 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.V. Longworth.

(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 January, — One thousand nine hundred and five 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,	Frederick Albert Longworth.
2. Sex and Age,	male. 28 years.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	student.
5. Religious Persuasion, so far as known,	protestant.
6. Previous Place of Abode,	London.
7. Place where Found and Examined,	first examined in London.
8. Length of time Insane,	four months.
9. Whether First Attack,	first attack.
10. Age (if known) on First Attack,	27 years.
11. When and where previously under Examination and Treatment (5)	Bloomfield Asylum Rathgar Rd Dublin
12. Duration of Existing Attack,	four months.
13. Supposed Cause,	worry & over work.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	violent 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,	E.V. Longworth (this petitioner) 4 Hume Street Dublin, brother. Sister & maternal Grandmother died in childbirth.
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 appeal 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 first day of January, — One thousand nine hundred and five years.

(*To be signed by the party applying*) E.V. Longworth.

T. & A. C.—Dec. 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, Henry J. Bewley, being a (1) Fellow of the Roy. Coll. of Physicians in Ireland, and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) 73 Bloomfield Donnybrook, in the County of Dublin separately from any other Medical Practitioner, visited and personally examined (4) Fredrick Albert Longworth and that the said Fred.k A Longworth is a (5) person of unsound 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 delusions saying he is God. He is at times violent striking patients & attendants without any provocation. Sometimes he absolutely refuses to speak for a day at a time.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) J. Coonan. Head Attendant in Bloomfield Asylum told me Mr Longworth has several times divided himself all over with a fork.

Name and Medical Designation, Henry J Bewley

Place of Abode, 84 Merrion Sq. Dublin

DATED this twentieth day of January 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.

(6) *State the facts.*

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

I, the undersigned, Joseph Carroll MD being a (1) Fellow of the Royal College of Physicians 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) Bloomfield, County Dublin in the County of separately from any other Medical Practitioner, visited and personally examined (4) Frederick Albert Longworth, and that the said Fred.k A. Longworth 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) Absolute dumbness, without reasonable cause or motive.

(On a former occasion 9th Oct. 1904, I saw him in a condition of maniacal excitement; with impulse, (carried out) to injure other people several by way of showing his dominance of race.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That he is frequently violent, and dangerous to others - striking out suddenly from an attitude of apparent peacefulness or rest, and without any provocation.

Name and Medical Designation, Joseph Carroll M.D. F.R.C.P.I.

Place of Abode, 43 Merrion Square Dublin

DATED this twentieth day of January 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, Henry J. Bewley, being (1) F.R.C.P.I. hereby certify, on soul and conscience, that I have this day, at (2) Bloomfield, in the County of Dublin, seen and personally examined Fredk. A. Longworth, 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. (Crichton Institution).

(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.

Henry J. Bewley

DATED this 20th day of January, 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 (Royal, Crichton Institution (Dumfries)) Asylum to receive therein Fredrick Albert Longworth to whom the foregoing Certificate of Emergency refers.

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

Signature and Address E.V. Longworth 4 Hume Street Dublin

Date 21st Jan 17. 1905.

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~~ (Dumfries and Galloway) at Dumfries, having had produced to me, with a Petition at the instance of (2) Ernest Victor Longworth, 4 Hume Street, Dublin. — Certificates under the hands of Henry J. Bewley, — and Joseph O'Carroll — 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) Frederick Albert Longworth, Bloomfield, Stonybrook, Dublin and that the said Frederick Albert Longworth is a (4) person of unsound mind, and a lunatic — and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Frederick Albert Longworth — 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 Frederick Albert Longworth — 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 January, One thousand nine hundred and five 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. 9334.

Frederick Albert Longworth

Adm: 21 January 1905.

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, 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 Mary Mc Morine or Herries Water Street, Dalbeattie 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 McMorine or Herries, — to the Southern Counties Asylum, Dumfries, 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. M. Austin.

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

DATED this twenty third (3) day of January, — 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 Mc. Morine or Herries.
2. Sex and Age,	Female - 62 years.
3. Married, Single, or Widowed,	Widow.
4. Condition of Life, and previous Occupation (if any),	Sometime sick Nurse. Has received Parish Relief for about 18 years.
5. Religious Persuasion, so far as known,	Prot.
6. Previous Place of Abode,	Haugh of Urr.
7. Place where Found and Examined,	Dalbeattie.
8. Length of time Insane,	see to 11. + 12.
9. Whether First Attack,	no
10. Age (if known) on First Attack,	about 46.
11. When and where previously under Examination and Treatment (5)	Was in Southern Counties Asylum, Dumfries from 10th Oct. 1889 till June 1892, and also from July 1892 till June 1894.
12. Duration of Existing Attack,	2 or 3 weeks.
13. Supposed Cause,	Cannot tell.
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 the Family known to be or to have been Insane,	A daughter Barbara Herries or McMillan, lives at 81 Oxford Drive N. Kelvinside Glasgow. Another Daughter Mary Herries is a boarder of Lunatic chargeable to the Parish of Kelton.
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 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 third day of January, — One thousand ~~eight~~ nine hundred and five.

(To be signed by the party applying) J. M. Austin.

T. & A. C.—Oct. 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, Samuel Archibald David Gillespie, [illegible] being a (1) Bachelor of Medicine & Master in Surgery, Univ[illegible]

and being in actual practice as a (2) General Medical Practitioner [illegible] do hereby certify, on soul and conscience, that I have this day, at (3) 8 Water St[illegible] Dalbeattie, [illegible] in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Widow Mary McMorrin or Herries, [illegible] and that the said Mary McMorrin or Herries is a (5) Person of unsound 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 very incoherently. Does not know how or when she came here. Has many delusions of various kinds. Has lost her memory large. Looks quite mental.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs McCaig 8 Water Street Dalbeattie. says she gets at times wild and wants out of bed to see imaginary friends. Talks to herself. Takes fits of melancholia & thinks she has done some awful wrong to someone.

Name and Medical Designation, D. D. Gillespie M.B. Edin[illegible]

Place of Abode, Alma House Dalbeattie

DATED this 23rd day of January, One thousand ~~eight~~ 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 McKechnie, being a (1) Bachelor 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) Eight Water Street, Dalbeattie, in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Mary McMorrin or Herries, Widow A Pauper, and that the said Mary Herries, is a (5) Person of unsound 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 quite incoherently and labours under delusions. I have once before certified her to the insane.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs. McCaig tells me she is unruly and wanders in her statements.

Name and Medical Designation, Robert McKechnie

Place of Abode Dalbeattie

DATED this twenty-third day of January, One thousand ~~eight~~ 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, Samuel Archibald David Gillespie, being (1) Bachelor of Medicine Master in Surgery (Univ. Edin.) hereby certify, on soul and conscience, that I have this day, at (2) 8 Watson St Dalbeattie in the County of Kirkcudbright, seen and personally examined Widow Mary McMorine or Herries, Widow Mc Morine or Herries, 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.

S. A. D. Gillespie

DATED this 23rd day of January, One thousand ~~eight~~ 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 Mary McMorine or Herries, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor & Chief Off. Asst.

Signature and Address J. M'Austin. Dalbeattie

Date 23 January 1905.

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

I, George Thomson Campion, Esquire, Advocate, Sheriff-Substitute of ~~the~~ (1) Dumfries and Galloway ~~of~~ at Dumfries, — having had produced to me, with a Petition at the instance of (2) James Menzies Gustion, Inspector of Poor Urr, Dalbeattie, Certificates under the hands of James Archibald David Gillespie and Robert McKerchar, — 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 Mc Morine or Herries, Water Street, Dalbeattie a pauper, and that the said Mary Mc Morine or Herries, 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 Mc Morine or Herries, as a Patient into the (6) Public — Asylum of ~~the Southern Counties Asylum~~ 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 Mary Mc Morine or Herries, 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 day of January One thousand ~~eight hundred and~~ nine hundred and five years. Eleven words deleted.

To the Superintendent of the (7) Public *Asylum of* ~~Crichton Royal Institution~~ Southern Counties at Dumfries.

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

[Signature] Geo. Campion

No. 9338.

Mary Mc Rotine or Herries.

(Ulst)

Adm: 23 January 1905.

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~~ and Galloway, — and his Substitutes, of Dumfries.

The Petition of Robert McCourtie, Inspector of Poor for the Parish of Troqueer:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Smith,

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

your Petitioner's (3) 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 John Smith, to the ~~Crichton~~ Royal asylum, — and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Robert McCourtie

(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 January, — 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,	John Smith.
2. Sex and Age,	Male - 30 years.
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous Occupation (if any).	Upholsterer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	15. King Street, Maxwelltown.
7. Place where Found and Examined,	15. King Street, Maxwelltown.
8. Length of time Insane,	about six months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	30 years.
11. When and where previously under Examination and Treatment (5)	Never previously under examination or treatment.
12. Duration of Existing Attack,	about six months
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,	Parish of Troqueer (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,	Mother:- Jane McTegan or Smith, 15. King Street, Maxwelltown. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

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 28th day of January, One thousand nine hundred and five.

(To be signed by the party applying) Robert McCourtie

T. & A. C.—June 1903. 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, Peter R. McMurray
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) 15 King St
Musselburgh Surgeon, in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) John Smith 15 King Street
Pauper John Smith and that
the said John 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)

Tells me people put lantern on his he
at night, that others whisper in his ear
& make him uncomfortable &c.

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

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

His Mother informs me that he comm
mother with him, and finds it that
Jesus Christ keeps bothering him.

Name and Medical Designation, P. R. McMurray M.B.

Place of Abode, Castle St Dumfries

DATED this 28th day of January One thousand nine hundred and 5.

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 Rewan 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) 15 King St
Musselburgh in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) John Smith, pauper.
15 King St Musselburgh and that
the said John Smith, 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) He says that
some persons are attempting to rearrange him by
shining a lantern on his forehead: That he hears voi
in his ears which he interprets as spiritual signal
that he Came a loaded revolver whereupon he wrote
himself & sent these peoples He 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)

His mother says that he has fears like
making at imaginary people. and has
in the household.

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

Place of Abode, Hope Place Musselburgh

DATED this 28th day of January 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, John Dewar Robson
being (1) a graduate of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) 15 Kings[illegible] Maxwelltown
in the County of Kirkcudbright, seen and personally examined
John Smith, pauper, 15 Kings[illegible], 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 Dewar Robson M.B. C.M.

DATED this twenty Eight day of January — 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
Asylum to receive therein John Smith
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Robert McCourtie Inspector Drapers

Date 28th January 1905.

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

I, George Campion, Advocate, (4) Sheriff Substitute
of Dumfries & Galloway, at Dumfries,
having had produced to me with a Petition at the instance of (5) Robert McCourtie
Inspector of Poor Drapers
Certificates under the hands of Patrick M. 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 (6) John Smith, 15 King Street, Maxwelltown, (Pauper) and that the said John Smith, 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 Smith 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 Smith, 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 Thirtieth day of January, One thousand nine hundred and five years.

To the Superintendent of the (8) Public
Asylum of Crichton Royal Institution,
Dumfries.

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

[Signature] Geo. Campion

No. 9339.

John Smith.

(Trooper)

Adm: 28 January 1905.

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 Annie O'Brien, 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 Annie O'Brien, 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 First (*) day of February One thousand nine hundred and five 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 O'Brien.
2. Sex and age,	Female, 30.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous occupation (if any),	Millworker.
5. Religious Persuasion, so far as known,	R. Cath.
6. Previous place of abode,	2 Nithsdale Terrace.
7. Place where found and examined,	2 Nithsdale Terrace.
8. Length of time Insane,	a short time
9. Whether First Attack,	no. fifth.
10. Age (if known) on First Attack,	18.
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 Last time 25th June, 1904
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,	31st January, 1905.
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,	Jane Arthur O'Brien, mother residing at 2 Nithsdale Terrace, Dumfries. not 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 Thirty first day of January, One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

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, Peter Murray Ker,
being a (1) Bachelor of Medicine and Member of the Royal College of Physicians, Edinburgh,
and being in actual practice as a (2) Consulting Practitioner
do hereby certify, on Soul and Conscience, that I have this day, at (3) Kittisdale Terrace, Dumfries,
in the County of Dumfries, separately from any other Medical practitioner, visited and personally examined (4) Annie O'Brien, pauper, Kittisdale Terrace, Dumfries, and that the said Annie O'Brien is a (5) person of unsound 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 appearance and manner she is dull and depressed at times, at other times excited. She is untidy in her habits Wont get up in the morning. Delusions as to her

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

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

Name of Medical Designation, Peter Murray Ker M.B.

Place of Abode, 20 Castle Street Dumfries

DATED this Thirty first day of January, One thousand nine hundred and five 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, George Robert Livingston,
being a (1) Doctor of Medicine of 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) Kittisdale Terrace Dumfries,
in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Annie O'Brien, pauper, Kittisdale Terrace, Dumfries, and that the said Annie O'Brien is a (5) person of unsound 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 & appearance. She is excitable laughing & talking rapidly and in a few minutes is dull & depressed Her unconventional methods of arranging her dress.

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

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

Name of Medical Designation, George R. Livingston M.B.

Place of Abode, 20 Castle Street Dumfries

DATED this Thirty first day of January, One thousand nine hundred and five years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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) Hillendale
Durham Terrace,
in the County of Dumfries, seen and personally examined
Annie O'Brien, 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.

(1) State Medical qualification.
(2) State place of Examination.

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

Peter Murray Kerr

Dated this Thirty first day of January One thousand nine hundred and five 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 Annie O'Brien
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 Annes 28, Queen Street, Dumfries.

Date, 31st January, 1905.

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 Annes, Inspector of Poor, Dumfries Certificates under the hands of Peter Murray Kerr and George Robert Livingstone, being two Medical Persons duly qualified in terms of an Act, entituled "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) Annie O'Brien, Milkmaker, 2 Hillendale Terrace, Dumfries (a pauper) and that the said Annie O'Brien 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 Annie O'Brien as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise the Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Annie O'Brien 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 First day of February One thousand nine hundred and five years. Three pointed words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo: Campion

No. 9340

Name, Annie O'Brien.
(Dumfries)

Date of Admission, 31st Jan.y 1905.

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 Young, Balnamore, Ballymoney, Ireland;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Gertrude Annie Georgina Young, —

(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 Gertrude Annie Georgina Young, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) James Young

(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 February, — One thousand nine hundred and five 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,	Gertrude Annie Georgina Young
2. Sex and Age,	Female — Forty.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	no occupation.
5. Religious Persuasion, so far as known,	Church of Ireland.
6. Previous Place of Abode,	Balnamore Ballymony Ireland
7. Place where Found and Examined,	Belfast.
8. Length of time Insane,	about one year.
9. Whether First Attack,	first attack.
10. Age (if known) on First Attack,	39.
11. When and where previously under Examination and Treatment (5)	not previously under treatment.
12. Duration of Existing Attack,	about one year.
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 Young Balnamore, Ballymony Ireland Husband. one Uncle.
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 31st day of January, — One thousand nine hundred and five years.

(To be signed by the party applying) James Young

P. p.

No. 9 Book

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, Martin B Mitchell
being a (1) L R C S I
and being in actual practice as a (2) Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 4 College Sq N. Belfast, in the County of Antrim separately from any other Medical Practitioner, visited and personally examined (4) Mrs Gertrude Young, and that the said Mrs Gertrude Young, 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) Delusions Hears voices. Has Lively Pulse in the Head. Her eye changes color. at times she has fine

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Rev. Canon Hanlon states She distrusts her husband & sells without cause. wanders from place to place. comes of Lunatic

Name and Medical Designation, } M B Mitchell M.D.

Place of Abode, 4 College Sq N Belfast

DATED this 24th day of January, One thousand nine hundred and five 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 Whitla
being a (1) M.D. R.U.I. &c
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 8 College Sq North Belfast, Ireland in the Co Antrim in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mrs Gertrude Young and that the said Mrs Gertrude Young 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) She suffers from delusions stating that her eyes differ in Colour several times a day & get like Snakes eyes. She hears voices & has visions.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She wanders from one place to another & that Spirits come & frizzle her hair.

Name and Medical Designation, } William Whitla (Kab.) M

Place of Abode, 8 College Sq N Belfast

DATED this 27th day of January, 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, Arthur B. Mitchell, being (1) a Fellow Royal College Surgeons Ireland hereby certify, on soul and conscience, that I have this day, at (2) 4 College Sq. in the County of Antrim, seen and personally examined Mr. Gertrude Young, 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 B Mitchell

DATED this 30th day of January, One thousand nine hundred and 5.

(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 Gertrude Annie Georgina Young, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address James Young

Date 31st Jan: 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) James Young, Balmamore, Ballymoney, Ireland, Certificates under the hands of Arthur B. Mitchell and William Whittle, 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) Gertrude Annie Georgina Young, Balmamore, aforesaid, (Petn's Wife), and that the said Gertrude Annie Georgina Young, is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Gertrude Annie Georgina Young 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 Gertrude Annie Georgina Young, 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 February One thousand nine hundred and five years.

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

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

[*Signature*] Geo: Campion

No. 9341

Gertrude Annie Georgina Young.

Adm: 31st Jan: 1905.

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 Kerr. Newry. Co. Down.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth M. Dempster — 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 M. Dempster — 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) Robt Kerr

DATED this Fourth (4) day of February One thousand nine hundred and five 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 M. Dempster.
2. Sex and Age,	Female. 5th years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Governess.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Newry. Co. Down.
7. Place where Found and Examined,	Dumfries.
8. Length of time Insane,	Over a year.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	53 years.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Over a year.
13. Supposed Cause,	Climacteric
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,	Robert Kerr (Brother-in-Law) Newry. Co. Down.
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 Fourth day of February — One thousand nine hundred and five years.

(To be signed by the party applying) Robt Kerr

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 H. Dalt being a (1) Bachelor of Medicine & Surgery of Edinburgh Uni and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) Crichton R Institution Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth M. Dempster of Henry Court Dock and that the said Elizabeth M. Dempster is a (5) person of unsound 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 mentally depressed, she says that she lost her soul, that she is forever surrounded in darkness. She is incoherent in her utterances

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

Nurse Rachael Hutchinson, charge nurse Crichton Royal Institution tells me that Eliz Dempster is at times acutely excited, violent & dangerous to others

Name and Medical Designation, Robert H. Dalt M.B. Ch

Place of Abode, Dumfries & Galloway Royal Infir

DATED this the third day of February 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.

(6) *State the facts.*

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

I, the undersigned, Frederick Hugh Clarke and Master in Surgery of being a (1) Bachelor 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) The Crichton Royal Institution, Dumfries in the County of Dumfries. separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth M. Dempster, Spinste Quarries, Henry, Co. Down, and that the said Elizabeth M. Dempster is a (5) person of unsound 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 depre Has lost all faith in anything human or divi Says she is and has been most wicked and her body and soul are lost for ever. Says s hears voices & people whispered in her ear and has other delusions

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 Dumfri

DATED this third day of February One thousand nine 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, Frederick Hugh Clarke, being (1) Bachelor of Medicine & Master in Surgery, 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 Elizabeth M Dempster, 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, and if a Graduate, in what examination.

(2) 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, MB. CM.

DATED this Third day of February One thousand nine hundred and five 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 Elizabeth M. Dempster - to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Robt. Kerr

Date 4th Feb: 1905.

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

I, George Campion, Esquire Advocate, Sheriff Substitute of Dumfries & Galloway, at Dumfries, having had produced to me with a Petition at the instance of (4) Robert Kerr, Newry, Co: Down, Certificates under the hands of Robert H. Watt, 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 M. Dempster, Newry, Co: Down, (Petitioners Sister-in-Law) and that the said Elizabeth M. Dempster 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 M. Dempster 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 M. Dempster, 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 February, One thousand nine hundred and five years.

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

[*Signature*] Geo. Campion

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

No. 9342.

Elizabeth R. Dempster

Adm: 4 February 1905.

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,—

The Petition of John Reid, Inspector of Poor, Kirkcolm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Ramsay, Weirston,

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

your Petitioner's (3) ~~parishioner~~ 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 Ramsay to the Dumfries Southern Counties Asylum and to sanction her admission into the said Asylum.

John Reid. Inspector

(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 February One thousand ~~nine~~ hundred and five 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 Ramsay
2. Sex and Age,	Female 42 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,	Weirston Kirkcolm
7. Place where Found and Examined,	Ervie
8. Length of time Insane,	—
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	42 years
11. When and where previously under Examination and Treatment,	—
12. Duration of Existing Attack,	a few days
13. Supposed Cause,	—
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,	Kirkcolm
18. Date of becoming Chargeable,	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,	John Ramsay Weirston Kirkcolm Brother
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 February One thousand ~~eight~~ nine hundred and five years

(*To be signed by Party applying*) John Reid. 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, Thomas Hurst being a (1) Bachelor of Medicine & Master of Surgery Aberdeen University and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) High Levis in the Parish of Kirkurd in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Ramsay and that the said Elizabeth Ramsay is a (5) person of unsound 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 vacuous excited expression (2) Has the idea that her relatives are attempting to poison her and that is upon account accordingly.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Jane Ramsay a Sister her visits informs me that she is suffering from poison and that on several occasions walked away from home unknown. ~~and that~~

Name and Medical Designation, Thomas Hurst

Place of Abode, Hanover House Stranraer

DATED this Second day of February One thousand ~~eight~~ 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, David Duke Monro being a (1) Bachelor of Medicine Master of Surgery of Aberdeen University and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Levis in the Parish of Kirkcolm in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Ramsay & Wigtown (Pauper) and that the said Elizabeth Ramsay is a (5) pauper lunatic insane 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 & suspicious look. Talks excitedly and says her friends are tried often and are trying to poison her food. & She was Spoken to [illegible] them

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her brother John tells me she been gradually getting worse & runs away from home and talks to herself &c

Name and Medical Designation, D. Duke Monro M.B.

Place of Abode 17 Levis St Stranraer

DATED this 3rd day of February One thousand ~~eight~~ 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,
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 Honorary (1) Sheriff Substitute of the (2) Sheriffdom of Dumfries and Galloway having had produced to me, with a Petition at the instance of (3) John Reid Inspector of Poor for the Parish of Kirkpatrick Certificates under the hands of Thomas Harper M.B. C.M. and David Duke Mones 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) Elizabeth Ramsay Pauper Kirkpatrickfleming and that the said Elizabeth Ramsay 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 Ramsay 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 Ramsay which accompanied the said Petition.

DATED this fourth day of February One thousand ~~eight~~ nine hundred and five years

John Cameron

To the Superintendent of the (7)
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. 9343.

Elizabeth Ramsay.

(Kirkcolm)

Adm: 6 February 1905.

17,699.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

GENERAL BOARD OF LUNACY
31 JAN
SCOTLAND

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned John England Inspector of Poor of the Parish of Sobie being desirous to transfer Mary Waddington Kennox at present a Patient in Ayr District Asylum a pauper lunatic of the Parish of which I am Inspector of Poor, and (¹) from the said Asylum to the Southern Counties 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,	Mary Waddington Kennox
2. Sex and Age,	Female 31 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. Parish to which the Lunatic (if a Pauper) is Chargeable,	Sobie
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,	Husband. Thomas Kennox Insurance Agent 112 Litchfield Street Kilmarnock. Brother Robert Waddington at present an inmate of Dumfries Asylum

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 England

(²) Inspector of Poor Parish of Sobie

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 24th day of January One thousand ~~eight~~ nine hundred and five

---

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 1899.

MEDICAL CERTIFICATE.

I, the undersigned Charles Marshall Rabsterbrook hereby certify that I have this day at (1) Ayr District Asylum, By personally examined Mary Waddington or Lennox who has been a Patient in said Asylum since (2) 21st January 1905, and I 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 certify, with respect to the Mental State of the Patient, that (4) She suffers from Recurring Mania, and is merely excitement incoherent and expresses delusions as to

and with respect to the Bodily State of the Patient, that (5) they are of persons Fair.

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 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.

(Name) C. M. Rabsterbrook

(Medical Qualification) M.D. F.R.C.P.Ed.

(Date) 26th January 1905.

No. 9 Med.
Mary Waddington or Lennox
(Sorbie)
Adm: 11th February 1905.

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 MARY WADDINGTON or LENNOX
from Ayr 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. A. Fouce
Secretary.

DATED at Edinburgh, this third day of February, One thousand ~~eight~~ nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

21st January, 1905.

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 *Vic., 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-shire & Galloway, *and his Substitutes*— at Dumfries.—

of ——

The Petition of James McLelland, Inspector of Poor, Parish of Colvend, humbly sheweth, that it appears from the subjoined statement and accompanying Medical Certificates that ——

James Black, ——

(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 authorise the transmission of the said James Black —— to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the party applying*) James McLelland, Inspector of Poor Parish of Colvend.

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

DATED this 16th — (4) day of February, 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, ...	James Black.
2. Sex and Age, ...	Male. 42 years of age.
3. Married, Single, or Widowed, ...	Single.
4. Condition of Life, and previous Occupation (if any), ...	Photo: Canvasser.
5. Religious persuasion, so far as known, ...	Protestant.
6. Previous Place of Abode, ...	Unsettled. Frequently in Poorhouse.
7. Place where found and Examined, ...	Barnhill Poorhouse, Glasgow.
8. Length of Time Insane, ...	Short time.
9. Whether First Attack, ...	Yes.
10. Age (if known) on First Attack, ...	—
11. When and where previously under examination and Treatment, ...	Not previously under examination & treatment. as far as known
12. Duration of Existing Attack, ...	a short time
13. Supposed Cause, ...	General Paralysis.
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, ...	Colvend 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, ...	Not Known. Not Known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Little is known of Black except that he was born in Scotland

(5) If Patient has been previously in an Asylum, state fact, 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 16th — day of February — One thousand nine hundred and five.

(*To be signed by the party applying*) James McLelland, Inspector of Poor Parish of Colvend.

G.E.—5406

MEDICAL CERTIFICATE, No. 1.

I, the undersigned, John Carswell
being a (1) Licentiate of the Royal College of Physicians Ed
and a Member 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) The Eastern District Hospital, Glasgow, in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) James Black, from Barnhill Poorhouse, Glasgow, pauper and that the said James Black is a (5) person of unsound 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 rest and foolish in behaviour; he is confu in mind; his memory is defective; an is delusive in his ideas.

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

Name and Medical Designation, J. Carswell L.R.C.P.E. &c

Place of Abode, 5 Royal Crescent Gla

DATED this 14th day of February, One thousand nine hundred and five.

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

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

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

(4) *Insert 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. 2.

I, the undersigned, Gilbert Garvey
being a (1) Bachelor of Medicine of University of Glasg
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Eastern District Hospital, Glasgow, in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) James Black, present residing there, pauper, and that the said James Black, is a (5) person of unsound 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 mind is memory defective and he is unable to give a very clear a of himself is somewhat delusional.

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

Name and Medical Designation. Gilbert Garvey MB. Ch

Place of Abode, Eastern District Hospital. Gl

DATED this 14th day of February, One thousand nine hundred and five.

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

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

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

(4) *Insert 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 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, 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) the (2) State place of examination
Eastern District Hospital, Glasgow in the County of Lanark
saw and personally examined James Black, , 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 Carswell M.B. C.P.E. & L.

DATED this 14th day of February, 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 Royal Asylum,
Dumfries, to receive therein James Black,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Removing Officer

Signature and Address, Alexander Grant 73 John Street Glasgow. For Dr. McLellan

Date, 14th February 1905. (Inspector of Poor Colonsay.

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

I George Campion Esquire Advocate, (1) Sheriff-Substitute (1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
of the (2) Dumfries and Galloway at Dumfries, (2) State whether a County or Stewartry.
having had produced to me, with a Petition at the instance of (3) James (3) Insert Name and Designation.
McLellan, Inspector of Poor, Colonsay,
certificates under the hands of John Carswell,
and Gilbert Gosney, , 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 Black, Barrhill Poorhouse (4) Describe him, and if a Pauper, state so.
Glasgow, (a pauper), and that the said James Black
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
AUTHORISE you to receive the said James Black
as a Patient into the (6) Public — Asylum of Crichton Royal Institution (6) Public, District, Parochial, or Private.
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 James Black,
which accompanied the said Petition.

DATED [at Dumfries] this Seventeenth day of February,
one thousand nine hundred and five years.

To the Superintendent of the (7) Asylum of Public Crichton Royal Institution, at Dumfries. (7) Public, District, Parochial, or Private.

(Signature) Geo: Campion

No. 9345.

James Black.

(Colours)

Adm: 15 February 1905.

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,~~ of Galloway and his Substitutes at Dumfries: The Petition of William Hyslop Walker, Culfad, Kirkpatrick-Durham:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Walker, ~~otherwise designed~~ your Petitioner's (3) Uncle, ~~James Walker~~ 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 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*) William Hyslop Walker

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

DATED this sixteenth (4) day of February — 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,	James Walker.
2. Sex and Age,	Male. 64 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farmer, Retired.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Bayen Croft, Troqueer, Dumfries.
7. Place where Found and Examined,	Culfad, K.P. Durham.
8. Length of time Insane,	Two months.
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	Fifty-five years.
11. When and where previously under Examination and Treatment (5)	Southern Counties Asylum.
12. Duration of Existing Attack,	Two months.
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,	William Hyslop Walker Culfad. K.P. Durham Nephew. 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 or approximate thereto. If previously under Treatment or treatment effect.

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

DATED this sixteenth day of February — One thousand nine hundred and five.

(*To be signed by the party applying*) William Hyslop Walker

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 Robertson
being a (1) Licentiate of the Royal College of Physicians and Surgeons Edinburgh
and being in actual practice as a (2) Genedal Practitioner of Medic
do hereby certify, on soul and conscience, that I have this day, at (3) Culfad
in the Parish of Kirkpatrick. Durham, in the County of Kirkcudbright
visited and personally examined (4) James. Walker, Culf
Kirkpatrick. Durham 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Patient states th
there is neither money nor deposit receipt in certain pocket books which
allen them there. Them declares they are of no value, as he will get nothing f
says that he has no clothes to put on, says he cant eat because there is no
to eat. Then he breaks down & declares that he has nothing, no friends, no hu
no place to go to. that everything is going wrong. that he is clean jammed. ac

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) are
Some days will lie in bed wont get up, other times will not go to bed
night but wants to go out. Says that an infant in the house is alarm
while she is the picture of health, declares that there is no food on table
time for servants, that the work is not getting on, & that he is ruined

Name and Medical Designation, George Robertson L.R.C.P.

Place of Abode, Kirkpatrick. Durham

DATED this fifteenth day of Feby One thousand nine hundred and five.

Information received from Mrs. W. Crosbie

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, Frederick Hugh Clarke
being a (1) Bachelor of Medicine & Master in Surgery of Glasg
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 of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) James Walker, retired farmer,
Culfad, Kirkpatrick - Durham, Kirkcudbrightshire 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is very depr
and melancholy. Says he has no money, or cl
or food, which I believe to be delusions. Has
appearance and manner of an insane per

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Wil
Hyslop Walker. Culfad. Kirkpatrick-Durham. tells
he was a patient in the Crichton Institution. Dum
for a similar attack seven and two years a

Name and Medical Designation, Fred Hugh Clarke M.B.

Place of Abode, Charlotte Street Dumfries

DATED this fifteenth day of February, One thousand nine 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, Frederick Hugh Clarke being (1) Bachelor of Medicine & Master in Surgery hereby certify, on soul and conscience, that I have this day, at (2) Charlotte St. Dfs in the County of Dumfries seen and personally examined James Walker. Culfad, Kirkpatrick Durham, 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.

Frederick Hugh Clarke, MB. CM.

DATED this Sixteenth day of February — One thousand nine hundred and five 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 Walker.
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address William H. Walker

Date 16-16 Feb 1903.

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

I, George Campion, Advocate, Sheriff Substitute of the Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) William Hyslop Walker, Culfad, Kirkpatrick-Durham, Certificates under the hands of George Robertson 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 (5) James Walker, Culfad, Kirkpatrick-Durham, (Private Asylum) and that the said James Walker 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 Walker as a Patient into the (7) Public Asylum of Southern Counties, 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 Walker 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 Seventeenth day of February, — One thousand nine hundred and five years.

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

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

[*Signature*] Geo. Campion

No. 9846.

James Walker.

Adm: 16 February 1905.

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 Dalgliesh, Forest, Kells,

humbly sheweth, that it appears, from the subjoined Statement and accompanying Medical Certificates, that William Dalgliesh,

(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 William Dalgliesh to the Crichton Royal Asylum, and to sanction the admission into the said Asylum.

(To be signed by the Party applying) John Dalgliesh

(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 February — 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,	William Dalgliesh.
2. Sex and Age,	Male.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Shepherd.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Forest, parish of Kells.
7. Place where Found and Examined,	Dalry, Kirkcudbrightshire
8. Length of time Insane,	one month.
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	one month.
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,	John Dalgliesh, Father, Forest, Parish of Kells. Father Confined in an Asylum for three Months about seven years ago.
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. 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 seventeenth day of February, One thousand nine hundred and five.

(To be signed by the party applying) John Dalgliesh

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 Galen Bartholomew, being a (1) Licentiate of the Royal College of Physicians & Surgeons 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 Kirkmichael Dairy, Galloway, in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) William Dalgliesh, Tomont, Dairy, Galloway, and that the said William Dalgliesh, is a (5) person of unsound 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 says that in last five weeks he has come to the conclusion that fear is the want of fear is the cause of true happiness that he is willing to a den of lions, and that his object in life is to demonstrate that if they are without fear they will be happy. He says also that his object in life is to prove to all that all men are that coloured races are as good as

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) John Dalgliesh His brother tells me that he has stood up in repeated the Lord's Prayer & that & after spending a fort over his Bible and Catechism he has got up and said the Millenium had arrived, & then was now no more nee him to work.

Name and Medical Designation, George G. Bartholomew L.R.

Place of Abode, Kenbank, Dalry, Kirkcudbright

DATED this the seventeenth day of February, 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, Ernest Hunter Hyde, being a (1) Licentiate of the Royal College of Physicians & Surgeons and being in actual practice as a (2) medical practitioner, do hereby certify, on soul and conscience, that I have this day, at (3) Castle Dow in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) William Dalgliesh, and that the said William Dalgliesh, is a (5) person of unsound 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 makes long rambling statements with no sense. Concerning his ministry & that the world has no end. & how that the millennium has arrived he need not do any more work.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He messages that he has a great quantity of money. does not want it but should spend it as he said I am with my brother and be shocked as he is dazed he comes under the influence of

Name and Medical Designation, E. Hunter Hyde L.R.C.P.S.Ed

Place of Abode, 33 Queen St. Castle Douglas

DATED this seventeenth day of February, 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, George Galen Bartholomew, ——— being (1) a Licentiate of the Royal College of Physicians Surgeons Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) Robinson Hotel, in the County of Kirkcudbright ———, seen and personally examined William Dalgliesh, ———, 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.

George G. Bartholomew L.R.C.P.&S.E

DATED this 17th — day of February, — 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 ——— Asylum to receive therein William Dalgliesh ——— to whom the foregoing Certificate of Emergency refers.

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

Signature and Address John Dalgliesh

Date 17 February 1905.

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

I, George Bampton, Advocate, Sheriff Substitute of ~~Dumfries~~, Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) John Dalgliesh, Forest, Kells, Dalry, ——— Certificates under the hands of George Galen Bartholomew, and Ernest Switzer Forde ——— 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 Dalgliesh, Forest, Kells, Dalry, (Petitioner's brother) and that the said William Dalgliesh, 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 Dalgliesh, 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 Dalgliesh ——— 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 February, One thousand nine hundred and five years.

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

[*Signature*] Geo: Campion

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

No. 9344.

William Dalgleish.

Adm: 14 February 1905.

B.—*This Form shall be in the keeping of the Superintendent of the Asylum to which the order of the Sheriff is issued.*

[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 Isabella Slimmon or Sliman, ~~Parkhead, Langholm~~,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates that my husband Robert Slimmon or Sliman, ———

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 Robert Slimmon or Sliman, ——— to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(To be signed by the Party applying) Mrs Isabella Slimmon

The date of the Petition to be within fourteen clear days following the dates of the Medical Certificate.

DATED this ~~Twenty-fifth~~ (2) day of February—One thousand ~~eight~~ hundred and five ~~nine~~.

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 Slimmon.
2. Sex and Age,	Male. 49.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any).	Labourer. miner.
5. Religious persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Wanlockhead.
7. Place where Found and Examined,	Dundee & Glenbill.
8. Length of Time Insane,	melancholy for about six months.
9. Whether First Attack,	September 1904
10. Age (if known) on First Attack,	48 years.
11. When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	None.
12. Duration of Existing Attack,	Six months.
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,	None.
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,	James, John, & Peter Slimmon Wanlockhead. Sons. None — and the Petitioner wife.
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-fifth~~ Eighth day of February, One thousand ~~eight~~ nine hundred and five.

(To be signed by party applying) Mrs Isabella Slimmon

MEDICAL CERTIFICATE No. I.

I, the undersigned Thomas Dunlop, being a (1) Bachelor of Medicine & Master in 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) High Harding Bank, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Robert Shannon and that the said Robert Shannon, is a (5) person of unsound 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 indicating Melancholy indifference to his wife and children

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs R. McGinty tells me that he has on two occasions attempted to take his life

Name and Medical Designation, Thomas Dunlop M.
Place of abode, Shambill. Dumfries

DATED this 25th day of May, One thousand nine ~~eight~~ hundred and five.

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

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

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

(4) *Insert 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 Ulmyo Bylon, being a (1) Bachelor of Medicine and Master in Surgery, and being in actual practice as a (2) Surgeon, hereby certify, on soul and conscience, that I have this day, at (3) No. Drumclarry Street, Thornhill, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Robert Shannon, Midway between Wanlockhead, and that the said Robert Shannon, is a (5) person of unsound 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 has no one for anybody - no love for his wife and children and that he has been impelled at times to commit violence.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife Isabella Shannon says that he has been depressed for some time, and has had bouts on his violence at times his brother-in-law Dougall Finlay & Fordenbank says he is melancholy & does not seem interested in conversation.

Name and Medical Designation, Ulmyo Bylon MB Ch
Place of abode, Thornhill Dumfries Shire

DATED this twenty eighth day of February, — One thousand nine ~~eight~~ 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 Thomas Dunlop, ——— being (1) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (2) ——— in the County of Dumfries, seen and personally examined Robert Shinnon ——, 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 28 day of Feby One thousand ~~eight~~ nine hundred and five.

Dr. Thomas Dunlop M.B. Cm

(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 Robert Shinnon — to whom the foregoing certificate of emergency refers.

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

Signature and Address, Isabella Shinnon Wanlockhead

Date, 28. 2. 05.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND 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) Mrs Isabella Shinnon or Shinnan, Dalkinna, Wanlockhead Dumfriesshire, 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 (2) Robert Shinnon or Shinnan, Miner, Dalkinna, Wanlockhead aforesaid, (Petrs Husband) and that the said Robert Shinnon or Shinnan 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 Robert Shinnon or Shinnan 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 Robert Shinnon or Shinnan 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 second day of March One thousand ~~eight~~ nine hundred and five years. - Five printed words deleted -

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9348.

Name, Robert Glennon.

Date of Admission, 28 February 1905.

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 Robert Keenan, 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 Robert Keenan, 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 Sixth — (*) day of March — One thousand nine hundred and five 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 Keenan.
2. Sex and age,	Male - 54.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous occupation (if any),	Millworker.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous place of abode,	3 Northcote Place.
7. Place where found and examined,	do. do.
8. Length of time Insane,	a few weeks.
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	49.
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. 19th August, 1904.
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,	6th March 1905.
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,	Sarah Hastings Keenan wife, residing at 3 Northcote Place, 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 Sixth — day of March — One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

No. 848

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, James Smith Gordon Gray
being a (1) Bachelor of Medicine and Surgery of Aberdeen Univ
and being in actual practice as a (2) General Practitioner,
do hereby certify, on Soul and Conscience, that I have this day, at (3) 3 Northgate Pla
Dumfries, in the County of
Dumfries, separately from any other Medical practitioner,
visited and personally examined (4) Robert Keenan (pauper)
3 Northgate Place, Dumfries, and that
the said Robert Keenan, is a (5) person of unsound
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 very depressed and miserable
Complains he can't sleep at nights, and says he c
get rest anywhere. Says people are always talk
about him

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sarah Hastings Keenan his wife tells me sh
to take him away from the fire yesterday as he
have burnt himself.

Name of Medical Designation, J. S. Gordon Gray
M.A. M.B. Cab

Place of Abode, 20 Castle Street

DATED this sixth day of March 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, George Robert Livingston,
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) 3 Northgate
Place Dumfries, in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Robert Keenan (Pauper)
3 Northgate Place Dumfries, and that
the said Robert Keenan, is a (5) person of
unsound 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 manner & appearance
He tells me he can't go out because
people are laughing at him & saying
things about him.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sarah Hastings Keenan his wife
tells me he attempted to strangle himself
this morning & that she cannot now
manage him

Name of Medical Designation. George R Livingston
M.D.

Place of Abode, 47 Castle Street Dumfries

DATED this sixth day of March One thousand nine hundred and five.

CERTIFICATE OF EMERGENCY.

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

I, the undersigned, James Smith Gordon Gray, ——— being (1) a Bachelor of Medicine and Surgeon, & Warden of Dumfries University hereby certify, on Soul and Conscience, that I have this day, at (2) 3 Northgate Place, Dumfries in the County of Dumfries ——— seen and personally examined Robert Keenan (Pauper) 3 Northgate Place Dumfries, 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.

(1) State Medical qualification.
(2) State place of Examination.

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

J. S. Gordon Gray MA MB CM

DATED this seventh — day of March, ——— 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 at Dumfries to receive therein Robert Keenan, ——— 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, Dumfries.

Date, 6th March, 1905.

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

I, George Campion, 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 James Smith Gordon Gray, and George Robert Livingston, being two Medical Persons duly qualified in terms of an Act, entituled "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) Robert Keenan, 3 Northgate Place, Dumfries, (Pauper), and that the said Robert Keenan, ——— 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 Robert Keenan, ——— 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 Robert Keenan, ——— 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 Seventh ——— day of March — One thousand nine hundred and five years. Three printed words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9849.

Name, Robert Keenan.
(Dunsfirm)

Date of Admission, 6 March 1905.

[FORM B[2]]

17,719.

25 *and* 26 *Vict. Cap.* 54, *Sect.* 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT A TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I the undersigned (1) Robert McNair Hamilton
being desirous to transfer Agnes McNair Hamilton
a present a Patient in Govan District Asylum and (2) whose nearest known relative I am
from the said Asylum to the Crichton Royal Institution

(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."

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.

Christian Name and Surname of Patient at length,	Agnes McNair Hamilton
Sex and Age,	Female 67 years
Married, Single, or Widowed,	Widow
Condition of Life, and Previous Occupation (if any),	Housewife
Religious Persuasion, so far as known,	Protestant
Parish to which the Lunatic (if a Pauper) is Chargeable,	Govan Combination
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,	Son. Robert McNair Hamilton 40 Keir Street Pollokshields Glasgow A brother of the patient was in an asylum

GENERAL BOARD OF LUNACY 23 FEB. 1905 SCOTLAND

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*) Robert McNair Hamilton

(3) Son.

(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 22nd day of February One thousand nine hundred and five 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 William Riddell Watson

(1) Name Asylum. hereby certify that I have this day at (1) Govan District Asylum

personally examined Agnes McNair or Hamilton who has been

(2) Insert Date of Admission. Patient in said Asylum since (2) 16th March 1897 and I certify th

(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 suicid

(5) is dangerous to others. I also certify, with respect to the Mental State

(4) Describe Mental State. the Patient, that (4) She is the subject of Schizoniacal Insanity. She is at times Excited and violent She has hallucinations of hearing

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5) she is poor

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; as

(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 pa

history of the Patient, bearing upon risk of suicide or danger to others, which I thin

ought to be brought under the notice of those who are to have charge of the Patient :—

was admitted as a dangerous lunatic by warrant of the Sheriff on the instan of the Procurator-Fiscal - and is still Fiscal case.

(Signature) W R Watson

(Medical Qualification) LRCS. LRCP Ld

(Date) 22 February 1905

No. 9850.
Agnes McNair or Hamilton
Admitted 16th March 1897.

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 Agnes McNair or Hamilton

from Govan 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 & Reoch
Secretary.

Dated at Edinburgh, this 23rd day of February, One thousand nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

16th March, 1897.

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 Rigg, Inspector of Poor of the parish of Kelton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Porteous 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 Isabella Porteous 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 Rigg

(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 March February One thousand nine hundred & five

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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,	Isabella Porteous
2. Sex and Age,	Female. 55
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Tailors Wife
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Rhonehouse,
7. Place where Found and Examined,	Rhonehouse
8. Length of time Insane,	Three weeks
9. Whether First Attack,	No
10. Age (if known) on First Attack,	46
11. When and where previously under Examination and Treatment (5)	Southern Counties Asylum
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,	Parish of 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,	–
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	–

(5) If patient has been previously in an Asylum, state the 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 Sixth day of March February One thousand nine hundred & five

(To be signed by the party applying) Samuel Rigg

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.

I, the undersigned, Robert B. Lorraine being a (1) Graduate of Edinburgh University and being in actual practice as a (2) General Practitioner (Physician & do hereby certify, on soul and conscience, that I have this day, at (3) Rhonehouse Kelton Parish in the County of Kirkcudbright. separately from any other Medical Practitioner, visited and personally examined (4) Isabella Porteous pauper and that the said Isabella Porteous is a (5) person of unsound 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 excitable talks loudly and rambles in her conversation, swears loudly and constantly.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs McQueen will show she stops & says she is easily excited, tries to keep herself and then attacks anyone she meets swearing at them and shouting loudly to herself.

Name and Medical Designation, Robert B. Lorraine M.B. Ch.B.

Place of Abode, Castle Douglas

DATED this 5th day of January 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, David Charles Welsh being a (1) Bachelor of Medicine & Surgery of Edinburgh Un and being in actual practice as a (2) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Rhonehouse in the Parish of Kelton in the County of Kirkcudbright. separately from any other Medical Practitioner, visited and personally examined (4) Isabella Porteus. pauper and that the said Isabella Porteus is a (5) person of unsound 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 met her recently on the Dalbeattie road when she was talking loudly, gesticulating & herself. She then waved me to me & laughed in my hand. Running after this she left me laughing (herself) in a violent manner. On my seeing her today she was in a state of intense excitement and talked & laughed in a loud manner using obscene language.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
I am informed by Mrs McQueen of Rhonehouse. and by Mrs of Castle Douglas that she is in the habit of stopping pas both pedestrians and those driving and shouting and swear at them in an excited manner.

Name and Medical Designation, D. Chas Welsh. M.B. Ch.B.

Place of Abode Castle Douglas.

DATED this Fifth day of March 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,
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, Lawrence Twentyman Napier Esquire Sheriff Substitute of ~~the~~ (1) Dumfries & Galloway at of Kirkcudbright — having had produced to me, with a Petition at the instance of (2) Samuel Rigg, Inspector of Poor of the Parish of Dalton

Certificates under the hands of Robert B. Lorraine — and David Charles Welsh — 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 Porteous, Pauper, — and that the said Isabella Porteous — 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 Porteous — as a patient into the Southern Counties Asylum, 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 Isabella Porteous — 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 Sixth — day of March One thousand nine hundred and five.

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

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

[*Signature*] Lawrence T. Napier

No. 9851.

Isabella Porteous
(Kelton)

Adm: 9 March 1905.

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 David Morton.

Abercromby Terrace, Castle Douglas: —

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Evaline Edith Kinloch Morton, 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 Evaline Edith Kinloch Morton, 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) David Morton

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

DATED this 9th (4) day of March, — 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,	Evaline Edith Kinloch Morton.
2. Sex and Age,	Female. 31.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Spinster.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Cally Park Lodge, Nr Castle Douglas.
7. Place where Found and Examined,	Abercromby Terrace, Castle Douglas.
8. Length of time Insane,	4 days.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	31 yrs.
11. When and where previously under Examination and Treatment (5)	Fowlers.
12. Duration of Existing Attack,	4 days
13. Supposed Cause,	Over the Ist June Dies Laing Scarlet Fever.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes a little.
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,	Father of Petitioner Abercromby Terrace, Castle Douglas.
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 former appreciation. If never 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 4th day of March, — One thousand nine hundred and ~~seven~~ five.

(To be signed by the party applying) David Morton

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 Brownlee Shaw
being a (1) Bachelor of Medicine & Master in 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) Allercrombly Terrace, Castle Douglas, in the County of Kirkcudbright,
separately from any other Medical Practitioner, visited and personally examined (4) Evaline Edith K. Morton,
and that the said Evaline E.K. Morton is a (5) person of unsound 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 melancholic, irritable at times, sings religious hymns, orders people out of the room, won't take food from the people, has hallucinations of hearing Angels & visions, says she will be punished for her sins & "trials" mean but Jesus" when on one occasion she stuck her tongue out & looking at the tongue, hides her head when asked

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her father says that his daughter orders her out of the room, won't eat & does not sleep. Sings aloud or cries out that people that are not there (imaginary) are jumping from the windows of a two storied house (bedroom) & to prevent this

Name and Medical Designation, Robert Brownlee Shaw M.B.
Place of Abode, Balmoral House, Castle Douglas
DATED this 22nd day of March, One thousand nine hundred and five.

- Sunday night last they do often & obtain in to the house and his wife says, Leaving upon but could find on my Thursday and by night the day the to take away his or other people.

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, Ernest Lupton Forde,
being a (1) Licentiate of the Royal Colleges of Physicians & 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) Abercrombie Terrace, Castle Douglas,
in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Evaline Edith Kulock Morton,
and that the said Evaline Edith Kulock Morton, 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) She told me that she wanted to die, that she was dying which is contrary to fact. She is melancholic & jumped out a window in order to save her soul as Jesus died to save her. That she was injured in her body & Satan overcame her.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her mother tells me that for some time she has been very religious that she jumped out of a two storied house & that she has visions & talks a good deal about religion that she jumped out of a two storied house on the pavement doing injury thereby.

Name and Medical Designation, Ernest L. Forde L.R.C.P. & S.E.
Place of Abode, 33 Queen St. Castle Douglas
DATED this 15th day of March, 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 Robert Brownlee Shaw
being (1) a Bachelor of Medicine & Master in Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Abercromby Terrace
in the County of Kirkcudbright seen and personally examined Evaline Edith Kinloch Morton, and that the said Castle Douglas,
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.

Robert Brownlee Shaw

DATED this Ninth day of March 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
Asylum to receive therein Evaline Morton,
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address David Morton 2 Abercromby Terrace Castle Douglas

Date 9th March 1905.

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
Morton, 2 Abercromby Terrace, Castle Douglas,
Certificates under the hands of Robert Brownlee Shaw,
and Ernest Leitzes Forde, — 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) Evaline Edith Kinloch Morton 2 Abercromby Terrace, Castle Douglas (Patient's daughter)
and that the said Evaline Edith Kinloch Morton, is a (5) person of unsound mind and an insane person,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Evaline Edith Kinloch Morton, 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 Evaline Edith Kinloch Morton, 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 Ninth day of March
One thousand nine hundred and five 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. 9352.

Evaline Edith Kinloch Rotton

Adm: 8 March 1905.

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 Archibald Maclachlan, Salen, Aros, Mull:—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Maclachlan, brother,

(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 John Maclachlan to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Archibald Maclachlan

(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 March — 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,	John Maclachlan,
2. Sex and Age,	Male, 37.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Minister Established Church Skipness. Argyllshire.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Skipness.
7. Place where Found and Examined,	Brae Rannoch, Bellahouston, Glasgow.
8. Length of time Insane,	One Month.
9. Whether First Attack,	Yes. Was Epileptic a year ago.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	One month.
13. Supposed Cause,	Possibly following 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,	Archibald Maclachlan, Salen, Aros, Mull. Brother. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an asylum, state address of latest order or application thereto. 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 9th — day of March — One thousand nine hundred and five.

(*To be signed by the party applying*) Archibald Maclachlan.

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 Hunter
being a (1) Licentiate of the Faculty of Physicians & 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)
Brae Kannoch, Bellahouston, Glasgow in the County of Lanark, separately from any other Medical Practitioner visited and personally examined (4) John Maclachlan, Minister of Shipness Quoad Sacra Parish and the said John Maclachlan is a (5) person of unsound 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 is restless & excited in manner, loquacious & inconsequent in conversation, & states that among other tricks played upon him in Shipness, some malicious people impregnated his room with brass filings which he could taste.

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

Name and Medical Designation, George Hunter, L.F.P.S.

Place of Abode, 1 Bellahouston Terrace, Glasgow

DATED this ninth day of March 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.

(6) *State the facts.*

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

I, the undersigned, Peter Murray Kerr
being a (1) Bachelor of Medicine & Member of the Faculty of Physicians & Surgeons 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) Cruickston, Drumfin in the County of Drumfin, separately from any other Medical Practitioner visited and personally examined (4) John Maclachlan. Minister of Shipness Quoad Sacra Parish, Argyllshire, and the said John Maclachlan is a (5) person of unsound 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 facile and talkative
sometimes incoherent
He is restless & excited.
Believes that people impregnated his room with [illegible]

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, 25 South Street Drumfin

DATED this tenth day of March One thousand nine 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, George Hunter, being (1) a licentiate of the faculty of Physician & Surgeon, Glasgow hereby certify, on soul and conscience, that I have this day, at (2) Bree Hannock, Bellahouston in the County of Lanark, seen and personally examined John Maclachlan, , 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.

George Hunter, L.R.C.P.S.G.

DATED this Ninth day of March, — 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 ~~Asylum~~ Crichton Royal Institution to receive therein John Maclachlan, — to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Arch[d] Maclachlan. Salen.

Date March 9th 1905.

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) Archibald Maclachlan, Salen, Aros, Mull. Certificates under the hands of George Hunter, 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) John Maclachlan, Bree Hannock, Bellahouston, Glasgow, and that the said John Maclachlan, — 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 Maclachlan, — as a patient into the 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 Maclachlan, — 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 March, — One thousand nine hundred and five years. Two words deleted

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

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

[*Signature*] John Clerk

No. 9353.

John Maclachlan.

Adm: 10 March 1905.

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 Arnold Jones, 12 Lethington Avenue - Glasgow:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Maria Jones, 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 Annie Maria Jones, 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) H. A. Jones

(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 March, — One thousand eight 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,	Annie Maria Jones.
2. Sex and Age,	Female. 47 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Lady — no occupation.
5. Religious Persuasion, so far as known,	Episcopal.
6. Previous Place of Abode,	Glasgow.
7. Place where Found and Examined,	2 Ackray Terrace, Langside, Glasgow.
8. Length of time Insane,	unknown.
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*],	Riccartsbar, Paisley, 1902.
12. Duration of Existing Attack,	unknown.
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,	
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,	H. A. Jones, and Chas. F. Jones, Brothers, 12 Lethington Avenue, and 7 Ackray Terrace Langside respectively — Glasgow.
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 10th day of March, — One thousand eight hundred and five.

(To be signed by the party applying) Henry Arnold Jones

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, Frederick Hugh Clarke, being a (1) Bachelor of Medicine & Master in Surgery 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) The Crichton Royal Institution, Dumfries, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Annie Maria Jones, Spinster 2 Achray Terrace. Langside. Glasgow, and that the said Annie 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has the appearance and manner of an insane person. Is very depressed and says everything goes wrong with her, and that she does not wish she were dead, and weeps constantly.

(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.B.

Place of Abode, Charlotte Street - Dumfries

DATED this fourth day of March, One thousand eight 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, James William White, being a (1) Bachelor of Medicine and Master in Surgery and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 2 Achray Terrace, Langside, Glasgow, in the County of Glasgow, separately from any other Medical Practitioner, visited and personally examined (4) Annie Maria Jones, and that the said Annie 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Constantly weeping while complaining that nothing is right. Desires to end her life and is apparently considering the best means thereof.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) By her mother in law several calculated attempts at suicide. Says she is deserted by God and man and wishes to die.

Name and Medical Designation, James William White M.B. CM

Place of Abode 7 Royal Park Square Glasgow

DATED this Fifth day of March, One thousand eight 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, James William White
being (1) Bachelor of medicine and master in Surgery (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) 2 Methven Terrace, Langside, (2) Place of examination.
in the County of the City of Glasgow, seen and personally examined Annie Maria Jones, 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 William White

DATED this tenth day of March, One thousand eight 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 Asylum to receive therein Annie Maria Jones to whom the foregoing Certificate of Emergency refers.

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

Signature and Address H. A. Jones.

Date 10th March 1905.

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) Stewartries of Dumfries and Galloway at Dumfries having had produced to me, with a Petition at the instance of (3) Henry Arnold Jones, 12 Lethington Avenue, Glasgow Certificates under the hands of Frederick Hugh Clarke, and James William White, 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 Maria Jones, 2 Torrey Terrace, Langside Glasgow and that the said Annie Maria Jones, 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 Maria Jones, 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 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.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.

DATED this Eleventh day of March One thousand eight hundred and five years.

John Clerk

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

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

No. 9354.

Annie Maria Jones.

Adm: 10 March 1905.

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 Roxburgh and his Substitutes,—

The Petition of John Imrie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Stein Imrie

(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 Stein Imrie to the Crichton Royal Institution and to sanction his admission into the said Asylum.

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

(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 March 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,	John Stein Imrie
2. Sex and Age,	Male – 25 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Shoemaker.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	4 Duke Street, Hawick.
7. Place where Found and Examined,	4 Duke Street, Hawick.
8. Length of time Insane,	One week.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	25 years.
11. When and where previously under Examination and Treatment (5)	Not previously under Examination or Treatment.
12. Duration of Existing Attack,	One week.
13. Supposed Cause,	Worry & Excitement.
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 his Family known to be or to have been Insane,	Father – John Imrie, 4 Duke Street, Hawick. 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 approximate thereto. 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 March One thousand nine hundred and five.

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

T. A. C.—June 1903.

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 James Whitehead Dy
being a (1) General Practitioner Doctor
Medicine of the University of Edinburgh
and being in actual practice as a (2) General Practition
do hereby certify, on soul and conscience, that I have this day, at (3) 4 Duke
Hawick in the County
Roxburgh separately from any other Medical Practitione
visited and personally examined (4) John Stein Smith,
4 Duke Street Hawick and th
the said John Stein Smith is a (5) person of
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)

(1) He is continually talking & passing
subject to subject - incoherently. He
interspersed his talking with laughing
whistling & singing
(2) He has a great antipathy for money in me
offers me a cheque for the whole of Hawick

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

(1) His disposition has been changi
for some weeks & he has become obsti
with his temper - the contrary of his nat
(2) wilful destruction of 3 under garments

Name and Medical Designation, C J W Dyson

Place of Abode, Hawick

DATED this 10 day of March 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.

(6) *State the facts.*

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

I, the undersigned, William Turnbull Barrie
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) 4 Duke
St Hawick in the County of
Roxburgh separately from any other Medical Practitioner,
visited and personally examined (4) John Stein Smith 4
Duke St. and that
the said John Stein 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.:—

1. Facts indicating Insanity observed by myself: (6) I speaks incoherently is speaking singing & whistling almost incessantly.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Takes no interest in anything his character is completely changed. Calls for port wine which he never before had any desire for.

Name and Medical Designation, Wm Turnbull Barrie M B C M

Place of Abode, Hawick.

DATED this Eleventh day of March 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,
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, Robert Mitchell (1) Sheriff-Substitute
of the (2) County of Roxburgh
having had produced to me, with a Petition at the instance of (3) John Imrie,
4 Duke Street, Hawick
Certificates under the hands of Charles James Whitehead Dixon M.D.
and William Imrie Barrie 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)
John Stein Imrie, Shoemaker, 4 Duke Street, Hawick and that the said
John Stein Imrie 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 Stein Imrie as a Patient into the (6) Crichton Royal ~~Asylum of~~ Institution, 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 John Stein Imrie which accompanied the said Petition.

DATED [at Hawick] this Eleventh day of March, One thousand nine hundred and five

To the Superintendent of the (7) Crichton Royal Institution,
~~Asylum of~~ Dumfries.
Four words delete.

[Signature] Robert Mitchell

(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. 9855.

John Stein Irvine.

Adm: 11 March 1905.

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 William Clarke, Inspector of Poor, Lochmaben.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Thorburn, —

(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 Thorburn — to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(*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 Fourteenth (4) day of March, — 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,	Janet Thorburn.
2. Sex and Age,	Female - 71 years.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Widow of a Tailor.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	44 Queen Street, Lochmaben.
7. Place where Found and Examined,	
8. Length of time Insane,	7 days.
9. Whether First Attack,	second.
10. Age (if known) on First Attack,	about 50.
11. When and where previously under Examination and Treatment (5)	Southern Counties asylum.
12. Duration of Existing Attack,	7 days.
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,	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 Bell, 44 Queen St, Lochmaben. Sister.
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, if approximate this cannot be given. If previously under treatment elsewhere, state where.

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 five.

(*To be signed by the party applying*) William Clarke

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Thomas Reid being a (1) Doctor of Medicine of Glasgow Univ and being in actual practice as a (2) General Medical Prac do hereby certify, on soul and conscience, that I have this day, at (3) 44 Queen Street, Lochmaben in the Coun Dumfries separately from any other Medical Practitio visited and personally examined (4) Janet Thorburn, 44 Queen Lochmaben, Pauper, and the said Janet Thorburn 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) She was obser with her face against the wall, howling and shrie about religion in an incoherent way. When I spoke to h rushed at me and struck me with all her might. Sayi the spirit of God was upon her and that she had orders to slay with her own delusions.

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

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

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

(4) *Insert 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.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mary Bell her sister says that she has been last two nights shouting and fighting in the room she cannot be got to go to bed, and that she is ge unmanageable.

Name and Medical Designation, Thomas Reid

Place of Abode, Lochmaben

DATED this 12th day of March, One thous nine hundred and five

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Charles Donaldson Law being a (1) Licentiate of the Royal College of Surg and the Royal College of Physicians 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 Cruch Royal Institution, Dumfries, in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Janet Thorburn, 44 Queen Street Lochmaben and the said Janet Thorburn 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 the subject of mania at present She talks incessantly and quite in coherently. She will reply to no questi and her attention cannot be arrested She is extremely restless.

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.*

Name and Medical Designation, Charles Donaldson L LRCP LRCS

Place of Abode, Cruchton Royal Institution

DATED this Thirteenth day of March, One thous 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, Norman Reid
being (1) a Doctor of Medicine of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) 44 Queen St Lochmaben
in the County of Dumfries, seen and personally examined Janet Thorburn, 44 Queen St Lochmaben 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.

Norman Reid M.D.

DATED this 12th day of March, 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 Janet Thorburn, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address William Clarke, 53 High St Lochmaben

Date 12th March, 1905.

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 Clarke, Inspector of Poor, Lochmaben, Certificates under the hands of Thomas Reid, and Charles Donaldson Law, 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 Thorburn, 44 Queen Street, Lochmaben, (a pauper) and that the said Janet Thorburn, 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 Thorburn, 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 Janet Thorburn, 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 nine hundred and five years.

To the Superintendent of the (6) Public *Asylum of* Southern Counties at Dumfries.

[Signature] Geo. Campion

(6) 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.

(6) *State the facts.*

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

I, the undersigned, Norman Reid
being a (1) Doctor of Medicine 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)
44 Queen Street, Lochmaben — in the County of
Dumfries — separately from any other Medical Practitioner,
visited and personally examined (4) Janet Thorburn, 44 Queen Street
Lochmaben, Pauper, — and that
the said Janet Thorburn — is a (5) person
of unsound 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 was standing
with her face against the wall, howling and shouting
about religion in an incoherent way. When I spoke to her
husband at me and struck me with all her might. Saying
the spirit of God was upon her and that she had orders to slay me
of which she disregarded.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mary Bell her sister says that she has been
last few nights shouting and talking incoherently
she cannot be got to go to bed, and that she is quite
unmanageable.

Name and Medical Designation, Norman Reid M.B.
Place of Abode, Lochmaben
DATED this 12th day of March, 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.

(6) *State the facts.*

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

I, the undersigned, Charles Donaldson Law
being a (1) Licentiate of the Royal College of Surgeons
and of the Royal College of Physicians 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) Janet Thorburn, of
44 Queen Street Lochmaben — and that
the said Janet Thorburn — is a (5) person
of unsound 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 the subject of mania at my visit
She talks incessantly and quite incoherently. She will reply to no questions
and her attention cannot be arrested.
She is extremely restless.

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

Name and Medical Designation, Charles Donaldson Law
LRCP LRCS Ed
Place of Abode, Crichton Royal Institution Dumfries
DATED this Thirteenth day of March, 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, Norman Reid
being (1) a Doctor of Medicine of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) 44 Queen St Lochmaben
in the County of Dumfries, seen and personally examined Janet Thorburn, 44 Queen St Lochmaben 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.

Norman Reid M.D.

DATED this 12th day of March, — 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 Janet Thorburn, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address William Clark, 53 High St Lochmaben

Date 13th March, 1905.

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 Clarke, Inspector of Poor, Lochmaben, — Certificates under the hands of Thomas Reid, — and Charles Donaldson Law, — 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 Thorburn, 44 Queen Street, Lochmaben, (a pauper), and that the said Janet Thorburn, — 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 Thorburn, — 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 Janet Thorburn, — 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 nine hundred and five years.

To the Superintendent of the (7) Public *Asylum of* Southern Counties, at Dumfries.

[Signature] Geo. Campion

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

No. 9356.

Janet Thorburn.

(Lochmaben)

Adm: 12 March 1905.

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 Thomas Duff Inspector of Poor parish of Kells New Galloway;

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Hamilton, —

(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 Robert Hamilton, — to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Thomas Duff

(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 March, — 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,	Robert Hamilton.
2. Sex and Age,	Male aged 52 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Labourer.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dalry village.
7. Place where Found and Examined,	Dalry.
8. Length of time Insane,	3½ years, was confined in Asylum 1901, and has not recovered
9. Whether first Attack,	51 years.
10. Age (if known) on first Attack,	Crichton Royal Institution.
11. When and where previously under Examination and Treatment (3)	3½ years.
12. Duration of existing Attack,	not known.
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	Threatens to commit Suicide
15. Whether Suicidal,	Threatens his wife & family.
16. Whether Dangerous to others,	Parish of Kells. Kirkcudbrightshire,
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Mary Murphy or Hamilton wife Dalry.
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,	—

(3) If patient has been previously in an Asylum or Establishment, state the date of latest admission or approximate date 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 March — One thousand nine hundred and five.

(*To be signed by the Party applying*) Thomas Duff

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 Cowan
being a (1) Bachelor of Medicine & Master of Surg
and being in actual practice as a (2) Medical Practitione
do hereby certify, on soul and conscience, that I have this day, at (3) Dalry
Kirkcudbright in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Robert Hamilton
and that
the said Robert Hamilton 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.:—

1. Facts indicating Insanity observed by myself: (6)
He is in a dull apathetic condit
so melancholy and slovenly both in
person and dress. admits that he
abuses his wife and family but ca
he can not help it.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife says — that he has no control over
his temper & threatens to cut her throat and poison
also to do harm to his family. He often thr
red hot coals at her and also struck
her & family. He refuses the kettle when and so
times does not work & sleeps naked

Name and Medical Designation, John Co

Place of Abode, Dalry Galloway

DATED this thirteenth day of March, 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.

(6) *State the facts.*

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

I, the undersigned, George Galen Bartholomew,
being a (1) Licentiate of the Royal College of Physicians &
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, in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Robert Hamilton,
and that
the said Robert Hamilton is a (5) person of
unsound 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 he has
been murdered & that no one will give him work, a
the same time admits that he has never tried
work, says that his hand scarcely ever gets c
he has got diabetes.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife tells me that he has several time
come down stairs naked, that he has threatened
murder her and that he refuses to allow her to
his property dressed.

Name and Medical Designation, George G. Bartholomew L.R.

Place of Abode, Kenbank Dalry Galloway

DATED this thirteenth day of March One thousand nine hundred and five.

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, John Conan Pub: Pr.
being (1) a Medical Practitioner
hereby certify, on soul and conscience, that I have this day, at (2) Dalry,
in the County of Kirkcudbright seen and personally examined
Robert Hamilton, 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 Conan Pub: Pr.

DATED this Thirteenth day of March, 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
Asylum to receive therein Robert Hamilton
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Thomas Duff

Date Fourteenth March 1905.

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) Thomas Duff
Inspector of Poor, Kells, New Galloway,
Certificates under the hands of John Conan,
and George Gaten Bartholomew, — 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 Hamilton, Dalry, Galloway (Veteran Pauper) and that the said Robert Hamilton, — 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 Hamilton, as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Hamilton, 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.
(7) His, or her.

DATED [at Dumfries,] this Fifteenth day of March
One thousand nine hundred and five years. Two words deleted.

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

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

[*Signature*] Jno Clerk

No. 935 P.

Robert Hamilton

(Kells)

Adm: 14 March 1905.

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 John Carson, Inspector of Poor, Kirkmabreck;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Dill, 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 Jane Dill, 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 Carson

(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 March, One thousand nine hundred and Five 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 Dill.
2. Sex and Age,	Female - 73 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,	St. John Street, Creetown.
7. Place where Found and Examined,	12 Poulton Terrace, Creetown.
8. Length of time Insane,	about four 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 four months.
13. Supposed Cause,	Had a slight 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,	Kirkmabreck.
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 Peter M'Dowall, Jubilee Villa, Creetown, Daughter. 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 when and date of latest admission or approximate thereto. If ever 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 March — One thousand nine hundred and Five Years.

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

T. & A. C.—April 1904.

MEDICAL CERTIFICATE. No. I.

I, the undersigned, Norman James McKie,
being a (1) Doctor of Medicine of the University of Edinburgh,
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) 12 Poulton Terrace, Cretown, in the County of Kirkendbright, separately from any other Medical Practitioner, visited and personally examined (4) Jane Dill, 12 Poulton Terrace, Cretown. Pauper, and that the said Jane Dill, is a (5) person of unsound 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)

Suffers from various delusions, for example she states to me that she was going to be married to a young man who was on his way from London, and that an uncle of his fell from a ladder and broke his back and left her £200. All this I well know to be untrue.

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

She is noisy at night. Is abusive and uses filthy language. Talks nonsense of various sorts. Accuses my informants of stealing her furnishing

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

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

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

(4) Insert 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.

Mrs Miller
12 Poulton Terrace

Name and Medical Designation, Norman James McKie M.D. C

Place of Abode, 14 Sutton Street N Wolton Street

DATED this fifteenth day of March, One thousand nine hundred and five.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, David Smith,
being a (1) Bachelor of Medicine and Master of Surgery of the University of Glasport
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 Poulton Terrace, Cretown, in the County of Kirkendbright, separately from any other Medical Practitioner, visited and personally examined (4) Jane Dill, Pauper, 12 Poulton Terrace, Cretown, and that the said Jane Dill, is a (5) person of unsound 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 some years Miss Dill has been a source of much annoyance to her neighbours; accusing them of stealing from her and of spying on her movements. She distrusts them very much by talking to herself and answering questions such as an ordinary young man who comes to London to talk to her, and who wishes to marry her.

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

She has on several occasions accused Mr. Parsons Draper of stopping money from the allowance which was always paid in full. She has asked me to find a carriage to take her away as Mrs. Miller says she wants to poison her.

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

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

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

(4) Insert 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.

Mrs Peter McDowall
(Daughter)
Victoria Villa,
Cretown - Longbeam Wynd
Kirkcudbrightshire

Name and Medical Designation, David Smith M.B. Ch

Place of Abode, Park Crescent, Cretown N. B.

DATED this fifteenth day of March, One thousand nine 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, David Smith,
being (1) Bachelor of Medicine Master of Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Cuetown
in the County of Kirkcudbright, seen and personally examined
Jane Dill, 12 Poulton Terrace, Cuetown, 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.

David Smith M.B. Ch.

DATED this eighteenth day of March One thousand nine hundred and five 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 Jane Dill
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address John Carson

Date March 18th 1905.

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 Carson,
Inspector of Poor, Kirkcudbright,
Certificates under the hands of Norman 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 (4)
Jane Dill 12 Poulton Terrace, Cuetown (a pauper) and that the said
Jane Dill, 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 Dill as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane
Dill, 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.
(7) His, or her.

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

To the Superintendent of the (8) Public
Asylum of Crichton Royal Institution,
at Dalbeattie.

[Signature] John Clerk

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

No. 9358.

Jane Dill.

(Kirkmabreck)

Adm: 18 March 1905.

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 David Tweedie, Ecclefechan:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Tweedie,

(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 Tweedie, to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) David Tweedie

(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 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 Tweedie.
2. Sex and Age,	Female, 5-6 years.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	Retired grocer
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Kelhead, near Annan.
7. Place where Found and Examined,	Ditto.
8. Length of time Insane,	8 days.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	5-6.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	8 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,	—
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 Tweedie, Ecclefechan, Brother. — no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Nil.

(5) If patient has been previously in an Establishment, state the date of latest admission or approximate thereto. If never 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 twentieth day of March, One thousand nine hundred and five.

(*To be signed by the party applying*) David Tweedie

MEDICAL CERTIFICATE, No. I.

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) Kilhead Cummertrees near Annan, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Twaddle, Kilhead, Cummertrees near Annan, and that the said Mary Twaddle, is a (5) person of unsound 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, raves in conversation. Has hallucinations of hearing, believes she hears the voice of the Lord telling her to do various outrageous things such as to seize & struggle with Mr Ewart her employer without any apparent cause. She has many delusions on religious subjects.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her brother David Twaddle tells me that she becomes maniacal at times. Strikes & rips them about her throws crockery & about & shouts & raves & prays by turns.

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

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

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

(4) *Insert 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, Will. Murdoch. M.D.

Place of Abode, Town Park, Annan.

DATED this twentieth day of March, One thousand nine hundred and five.

MEDICAL CERTIFICATE, No. II.

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) Kilhead Cummertrees, near Annan, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Twaddie, Kilhead Cummertrees, near Annan, and that the said Mary Twaddie, is a (5) person of unsound 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 in manner; incoherent in conversation; has religious mania; believes she has got a special & superhuman power imparted to her & a special revelation from the Holy Ghost.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Carlyle states that for the past few days she has conducted herself in an insane fashion, has many delusions, prays & sings alternately & believes that she has had a son.

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

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

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

(4) *Insert 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, J. L. Howie MB&Ch

Place of Abode, Edward House, Annan.

DATED this twentieth day of March, 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, William Murdoch, ~~Surgeon~~, being (1) a Doctor of Medicine of Edinburgh University, hereby certify, on soul and conscience, that I have this day, at (2) Kelhead, in the County of Dumfries, seen and personally examined Mary Tweedie, 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 Murdoch. M.D. (Edin.)

DATED this twentieth day of March 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 Mary Tweedie, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address David Tweedie Ecclefechan

Date 20th March 1905.

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

I, Lawrence J. Napier, Advocate, Sheriff Substitute of (1) Dumfries and Galloway, ~~at Kirkcudbright~~, having had produced to me, with a Petition at the instance of (2) David Tweedie, Ecclefechan, Dumfriesshire, Certificates under the hands of William Murdoch, 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) Mary Tweedie, Kelhead, near Annan, (Petty's Sisters), and that the said Mary Tweedie, 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 Tweedie 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 Tweedie 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 March, One thousand nine hundred and five years. ~~Two and delete~~.

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

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

[*Signature*] Lawrence J. Napier.

No. 9359.

Mary Sweedie.

Adm: 20 March 1905.

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 W. D. Richardson Inspector of Poor Ruthwald:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Pattie

(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 John Pattie to the Dumfries Royal Asylum, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) W. D. Richardson

(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 March, One thousand eight 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,	John Pattie.
2. Sex and Age,	Male - 43 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farm Labourer.
5. Religious Persuasion, so far as known,	Established Church of Scotland.
6. Previous Place of Abode,	Town Head, Kirkmichael.
7. Place where Found and Examined,	Hunthills, Ruthwald.
8. Length of time Insane,	about 8 wks.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	43 years.
(5) If patient has been previously in an Asylum, state name and date of latest Admission or approximate thereto. If ever previously under Examination or Treatment state fact. 11. When and where previously under Examination and Treatment (5)	never before.
12. Duration of Existing Attack,	8 wks.
13. Supposed Cause,	fall upon Head.
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,	Ruthwald.
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,	Ellen Hamilton. Longrigg, Ruthwald Sister. yes his mother's Brothers.
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 22nd day of March, One thousand eight hundred and five.

(To be signed by the party applying) W. D. Richardson

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Berkeley Kenneth Richards, M.B.,
being a (1) ~~Physician and Surgeon~~ L.R.C.P.S. & L.R.C.S.E. L.F.P.S.G.
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Huntshill, Jedburgh, Jedburgh
Jedburgh, in the County of Roxburgh,
separately from any other Medical Practitioner, visited and personally examined (4) John Pattie, Huntshills, Jedburgh
and that the said John Pattie, is a (5) Person of unsound 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 been attending Patient since February last. He is suffering from delusions and at times is violent & would require to be restrained. On Dec 1st 1904 he fell from a tree & complained of constant pain in his head. He has kept his bed since the date of the accident.

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

His sister, Mrs Carson, told me he had attempts to cut his throat on March 21st & that he got out of the house one night & returned with his clothes as though he had been in a bath or the like.

Name and Medical Designation, Berkeley Kenneth Richards

Place of Abode, Cruchencairn, Kilmahoe.

DATED this 22nd day of March, — One thousand nine hundred and five.

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

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

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

(4) *Insert 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 Donaldson Law,
being a (1) Licentiate of the Royal College of Physicians and the Royal College of Surgeons, 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 Dumfriesshire, separately from any other Medical Practitioner, visited and personally examined (4) John Pattie, Pauper, Huntshills, Jedburgh,
and that the said John Pattie, is a (5) person of unsound 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. His insane manner and appearance whilst his face when spoken to, & comes in with his hands.

ii. His mental depression. He says that he is miserable. He only answers in monosyllables.

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

Name and Medical Designation, Charles D. Law, M.B.

Place of Abode Crichton Royal Institution Dumfries

DATED this Twenty third day of March, — One thousand nine hundred and five.

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

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

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

(4) *Insert 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 W. Berkeley Kenneth Richards, being (1) L.R.C.P.C.I. L.R.C.S.E. L.R.H.P.S.G. hereby certify, on soul and conscience, that I have this day, at (2) Huntbills, Tinwald in the County of Dumfries, seen and personally examined John Pattie, 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.

W. Berkeley. Kenneth Richards

DATED this 22nd day of March, — One thousand ~~eight~~ 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 ~~Asylum~~ Crichton Royal Institution, ~~Dumfries, Galloway~~ to receive therein John Pattie, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address W. Dickson

Date 23rd March, 1905.

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

I, George Sampson, Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of W. Dickson, Inspector of Poor, Tinwald, Certificates, under the hands of Berkeley Kenneth Richards, and Charles Donaldson Law, 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 Pattie, Huntbills, Tinwald, (Pauper) and that the said John Pattie, 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 Pattie 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 John Pattie, 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 third day of March, nine One thousand ~~eight~~ hundred and five 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. Sampson

No. 9860.

John Pattie.

(Arivald)

Adm: 22 March 1905.

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 Robert Inglis. Lovestone. Girvan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Guthrie Inglis.

(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 Guthrie Inglis to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Robt Inglis

(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 five 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 Guthrie Inglis.
2. Sex and Age,	Male - 28 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Bank Clerk.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Lovestone. Girvan.
7. Place where Found and Examined,	Girvan - Dumfries.
8. Length of time Insane,	About a week.
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,	About a week.
13. Supposed Cause,	Religion.
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 Inglis. Lovestone Girvan. Father.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) patient has previously in an establishment, 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 24th day of March One thousand nine hundred and five years.

(To be signed by the party applying) Robt Inglis

P. p.

T. & A. C.—Sept. 1903.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Geoge McCarron
being a (1) M.B.C.M. 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) Lorstone, Gowan Ayr in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Wm Guthrie Esqrs, Lorstone
and that the said Gowan Wm Guthrie Esqrs is a (5) person of unsound 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) That he cannot answer any question intelligently: that his manner is excited & restless. it is.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife states that he is quite altered in character, that he does not speak as behaves rationally. She further states that he has delusions thinks he is St Peter – that dogs are dead &c.

Name and Medical Designation, Geoge McCarron. M.B.

Place of Abode, 7 Barns St. Ayr

DATED this 24th day of March One thousand nine hundred and five

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

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

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

(4) *Insert 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, 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) The Crichton Royal Institution Dumfries in the County of Dumfries
separately from any other Medical Practitioner, visited and personally examined (4) William Guthrie Esqrs, Bank Clerk, Lorestone, Gowan and that the said William Guthrie Esqrs is a (5) person of unsound 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 aimlessly and disconnectedly about religious matters. He says that Satan works through people tempting him to do. He also says that he has felt at one with one of the Apostles.

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

Name and Medical Designation, Frederick Hugh Clarke M.B.C.M.

Place of Abode, Charlotte Street, Dumfries.

DATED this twenty sixth day of March One thousand nine hundred and five 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, George McKerrow
being (1) M.B. C.M. of Edin. University
hereby certify, on soul and conscience, that I have this day, at (2) Lovestone Gurvan
in the County of Ayr, seen and personally examined
Wm Guthrie Inglis, 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.

Geo McKerrow

DATED this 24th day of March 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
Asylum to receive therein William Guthrie Inglis.
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Wm Inglis Lovestone Gurvan

Date 24th March 1905

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

I, John Clerk, Esquire, Honorary Sheriff Substitute
of Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (4) Robert Inglis,
Lovestone, Gurvan.
Certificates under the hands of George McKerrow,
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 (5) William Guthrie Inglis, Lovestone Gurvan (Private Son) and that the said
William Guthrie Inglis 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 William Guthrie Inglis 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 William Guthrie Inglis 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 twenty-seventh day of March,
One thousand nine hundred and five years.

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

[*Signature*] John Clerk

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

No. 9361.

William Guthrie Inglis.

Adm: 24 March 1905.

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 ~~Kirkcudbright~~ Dumfries & Galloway and of the (2) ~~Shire~~ and his Substitutes,— at Dumfries.

The Petition of Robert Fergusson Boreland Hill Southwick Kirkcudbrightshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Susan Catherine Fergusson 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 Susan Catherine Fergusson 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) Robert Fergusson.

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

DATED this 26th (4) day of March 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,	Susan Catherine Fergusson
2. Sex and Age,	Female 17.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Office girl
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Boreland Hill Southwick
7. Place where Found and Examined,	Boreland Hill Southwick Kirkcudbright
8. Length of time Insane,	One week.
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	17.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	one week.
13. Supposed Cause,	Suppression of Catamonia Hysteria
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 Fergusson Boreland Hill Southwick 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 name, and date of latest admission or appointment 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 26th day of March One thousand nine hundred and five

(To be signed by the party applying) Robert Fergusson.

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, Matthew Cameron being a (1) M.B.C.M 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) Boreland Hill Southwick Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Susan Catherine Ferguson and that the said Susan Catherine Ferguson is a (5) Person of unsound 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) Refuses all fo talks incoherently, refuses to sit still, wild look; works with nervous, with hands a suffers from delusions, and cries

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Changed in temperament, refuses to take food, & do anything for herself. mafas She is not at home, talks incoherently au unmanageable in home. Communicated by

Robert Ferguson

Name and Medical Designation, Matthew Cameron M.B.C.

Place of Abode, Maxwelltown

DATED this twenty sixth day of March 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.*

(6) *State the facts.*

I, the undersigned, Peter Murray Kerr being a (1) Bachelor of Medicine and Master of 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 separately from any other Medical Practitioner, visited and personally examined (4) Susan Catherine Ferguson Office girl Boreland Hill Southwick, Kirkcudbright and that the said Susan Catherine Ferguson is a (5) person of unsound 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 ungovernable and stupid does not know the day of the month or year. Talks incoherently & is very feeble

(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 twenty sixth day of March One thousand nine 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, Matthew Cameron being (1) M. B. C. M. University of Glasgow hereby certify, on soul and conscience, that I have this day, at (2) Boreland Hill in the County of Kirkcudbright, seen and personally examined Susan Catherine Fergusson, 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.

Matthew Cameron

DATED this 26th day of March 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 Susan Catherine Fergusson to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Robert Fergusson

Date 26th March 1905.

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

I, John Clerk, Esquire, Honorary Sheriff Substitute (1) of Dumfries and Galloway, at Dumfries, having had produced to me with a Petition at the instance of (2) Robert Fergusson, Boreland Hill, Southwick Certificates under the hands of Matthew Cameron, 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) Susan Catherine Fergusson, Boreland Hill, Southwick, (Petitioner's Daughter) and that the said Susan Catherine Fergusson 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 Catherine Fergusson 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 Catherine Fergusson 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 March, One thousand nine hundred and five years.

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

[Signature] John Clerk

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

No. 9362.

Susan Catherine Fergusson

Adm: 26th March 1905.

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 ~~Dumfriesshire~~ & Galloway *and his Substitutes,*— of Dumfries

The Petition of John Laing. Inspector of Poor in the Parish of Annan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Edward Herbert Calvert 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 Edward Herbert Calvert — 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 Laing

DATED this 25th — (4) day of March — 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,	Edward Herbert Calvert
2. Sex and Age,	Sex Male. Age 28 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Student
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	2 Park Terrace. Annan. do.
7. Place where Found and Examined,	
8. Length of time Insane,	Three or four days at present no.
9. Whether First Attack,	
10. Age (if known) on First Attack,	24 years
11. When and where previously under Examination and Treatment (3)	Crichton Royal Institution
12. Duration of Existing Attack,	Three or four days
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	doubtful
16. Whether Dangerous to others,	Yes dangerous.
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,	Mrs Mary Calvert. 2 Park Terrace. Annan. Mother. no ~~family~~ member of family known to have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(3) If patient has previously in an Asylum, state name and date of latest Order or Appointment 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 25th — day of March — One thousand nine hundred and five

(To be signed by the party applying) John Laing

P. P.

T. & A. C.—August 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, John Lindsay Howie
being a (1) Bachelor of Medicine & Master in Surgery 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) 2 Park Terrace, Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Edward Herbert Calvert, Student, 2 Park Terrace, Annan, a pauper and that the said Edward Herbert Calvert is a (5) person of unsound 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 vacant staring look which he maintains when spoken to & occasionally answers in monosyllables but will communicate nothing. His whole attitude is that of an insane person.

(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 has been strange in manner for the past few days, & has been examining his food over & over & today violently attacked his mother who called to see him.

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

Place of Abode, Edwin House, Annan

DATED this twenty fifth day of March — 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.

(6) *State the facts.*

I, the undersigned, William Bamford
being a (1) Doctor of Medicine of 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) 2 Park Terrace Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Edward Herbert-Calvert, Student 2 Park Terrace, Annan, a pauper and that the said Edward Herbert-Calvert is a (5) person of unsound 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 excitable, manner & speech indicate excitement of an abnormal kind which easily gets beyond his control readily — in evidence to others. I am informed he has been subject of violent mania on previous occasions.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother in law William Johnstone tells me he has been abnormally excited restless for some days past — has behaved like an insane person. He violently attacked Rev. Robt. Wark, Annan, today without provocation.

Name and Medical Designation, Wm Bamford M.B.

Place of Abode, Friars Park, Annan

DATED this twenty fifth day of March — 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, John Lindsay Howie being (1) m.b.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 Edward Herbert Calvert, 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 twenty fifth day of March 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 Asylum to receive therein Edward Herbert Calvert 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 25th March 1905.

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) John Laurie, Inspector of Poor, 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 (4) Edward Herbert Calvert, Park Terrace, Annan, (Pauper) and that the said Edward Herbert Calvert 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 Edward Herbert Calvert 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 Edward Herbert Calvert 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 March, One thousand nine hundred and five years.

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

[Signature] John Clerk

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

No. 9363.

Edward Herbert Calvert
(Arran)

Adm: 26 March 1905.

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 ~~Dale~~ *and his Substitutes,*— at Dumfries:

The Petition of Gertrude Sarah Hodson or Gillespie.

45 West Road, Irvine.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Gillespie, ——

(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 John Gillespie, —— to the Crichton Royal Institution, — and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Gertrude Sarah Hodson or Gillespie

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

DATED this 27th (4) day of March, —— 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,	John Gillespie.
2. Sex and Age,	Male; 52.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Draper.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	45 West Road, Irvine, Ayrshire.
7. Place where Found and Examined,	5 Royal Crescent Glasgow & 45 West Rd Irvine.
8. Length of time Insane,	Several months.
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	52 years.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Several months.
13. Supposed Cause,	General Paralysis.
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 his Family known to be or to have been Insane,	Gertrude Sarah Hodson or Gillespie. 28 Ayres Road Old Trafford, Manchester. — wife. None.
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 appointment 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 27th day of March — One thousand nine hundred and five

(*To be signed by the party applying*) Gertrude Sarah Hodson or Gillespie

P. p.

T. & A. C.—Dec. 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, 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) 5 Royal Crescent, west, Glasgow, ——— in the County of ——— Lanark — separately from any other Medical Practitioner, visited and personally examined (4) John Gillespie, of 45 west Road, Irvine, Draper, ——— and that the said John 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) He is very confused in mind & his memory is defective; he is foolish & incoherent in conversation; and he is irrational and delusive in his ideas, and has no proper appreciation of his condition.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife states that he has recently become extravagant and foolish in business transactions, and is strange in conduct and irrational in his ideas.

Name and Medical Designation, J. Carswell L.R.C.P.E.

Place of Abode, 5 Royal Crescent W. Glasgow.

DATED this 22nd day of March, — 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.

(6) *State the facts.*

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

I, the undersigned, James Thomson ——— being a (1) Doctor of Medicine and Master in Surgery 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) 45 West Road, Irvine, ——— in the County of ——— Ayr, ——— separately from any other Medical Practitioner, visited and personally examined (4) John Gillespie of 45 West Road Irvine, Draper, ——— and that the said John 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)

He is unrelated in conversation, and has a great idea as to his physical strength, while at the same time, his speech is paralysed to the extent that he cannot articulate many words. He becomes excited in conversation and talks very loudly.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife Mrs Gillespie informs me that he and she become quite incomfortable, and that lately he left his brother in laws house and threatened to take his life, also that he was brought home on Saturday last by a police as a great state of excitement.

Name and Medical Designation, James Thomson M.D.

Place of Abode, 168 High Street Irvine.

DATED this 24th day of March, — 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 James Thomson being (1) M. D. & C. M., of Glasgow University, hereby certify, on soul and conscience, that I have this day, at (2) 46 West Road, Irvine in the County of Ayr, seen and personally examined John Gillespie, 45 West Road Irvine, 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.

James Thomson M. D. & C. M.

DATED this 27th day of March, — 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 John Gillespie, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Gertrude Sarah Hodson or Gillespie 45 West Rd Irvine.

Date March 27/05

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

I, George Campion, Advocate, (1) Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Gertrude Sarah Hodson or Gillespie, 45 West Road, Irvine, Certificates under the hands of John Barswell, — and James 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 Gillespie 45 West Road, Irvine, (Petnr's Husband) and that the said John Gillespie, — 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 Gillespie, — 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 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.
(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 twentyeighth day of March, One thousand nine hundred and five years.

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

[Signature] Geo. Campion

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

No. 9864.

John Gillespie.

Adm: 24 March 1905.

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 William Wallace Morrison, Inspector of Poor for the Parish of Kirkcudbright

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Mackay Jr, residing in Saint Cuthberts Street, of the Burgh of Kirkcudbright 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 Mackay Junior 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) Wm W. Morrison

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

DATED this 27th (4) day of March One thousand nine hundred and five 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 Mackay Junior
2. Sex and Age,	Male 29
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,	St Cuthberts St Kirkcudbright
7. Place where Found and Examined,	do
8. Length of time Insane,	About four years
9. Whether First Attack,	No
10. Age (if known) on First Attack,	25
11. When and where previously under Examination and Treatment (5)	S. C. Asylum Dumfries
12. Duration of Existing Attack,	About one year
13. Supposed Cause,	
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,	Kirkcudbright
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 Mackay Senior Jeweller St Cuthberts St Kirkcudbright Father. No other members of family insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has previously in an Asylum, state Asylum, and date of latest admission or application thereto. If previously under Care or Treatment elsewhere, state fact.

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

DATED this 27th day of March One thousand nine hundred and five.

(To be signed by the party applying) Wm W 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.

I, the undersigned, Wm Johnstone
being a (1) M. D. 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. Catherines
Kirkcudbright in the County of Kirkcudbright
separately from any other Medical Practitioner,
visited and personally examined (4) David McKay Pauper
and that
the said David McKay 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
That he leaves the house at night and
at times by great part of the night in
a state - uses the most disgusting

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
has been lately noticed on Bath
Road and indulging in various acts
of - informed by Friends.

Name and Medical Designation, Wm Johnstone M.D.

Place of Abode, Kirkcudbright

DATED this 27th day of March 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, Wm Swanston Fenner Reid
being a (1) Student 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) Lochfield
St. Kirkcudbright in the County of Kirkcudbright
separately from any other Medical Practitioner,
visited and personally examined (4) David McKay
and that
the said David McKay is a (5) person
of unsound 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 constantly wandering about in an
aimless sort of way. One night he turned & may
have growled at me in a very cunning way
with intent to hurt - goes about with a chain
& stick.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Goes about something scantily clothed - jumps
dykes & ditches & kicks every cat he can
he comes across. Frightens girls & boys going to
school.

told me by
George Scott
Oakley
Kirkcudbright

Name and Medical Designation, W. S. F. Reid. M.B. C.

Place of Abode, Oakley Kirkcudbright

DATED this 27th day of March 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,
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, Lawrence Twentyman Napier, Esquire, Advocate ~~of the~~ (1) Sheriff Substitute of Dumfries & Galloway having had produced to me, with a Petition at the instance of (2) William Wallace Morrison Inspector of Poor of the Parish of Kirkcudbright Certificates under the hands of William Johnstone and William Swanston Spence Bird — 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 Mackay Junior, and that the said David Mackay 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 David Mackay Junior — as a Patient into the Southern Counties Asylum ~~of~~ Dumfries and I authorize (6) Public, District, Parochial, or Private. Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Mackay 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.

DATED [at Kirkcudbright] this Twenty-seventh day of March One thousand nine hundred and five

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

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

[Signature] Lawrence T. Napier

No. 9365.

David Mackay. jun:

(Kirkcudbright)

Adm: 28 March 1905.

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 Miles McInnes. Inspector of Poor, Dumfries.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Grant,

(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 John Grant to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Miles McInnes

(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 March, One thousand nine hundred and five 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 Grant.
2. Sex and Age,	Male. 72 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Vagrant (Nailmaker)
5. Religious Persuasion, so far as known,	Crichton Royal Inst^{n} Dumfries.
6. Previous Place of Abode,	Do. Do.
7. Place where Found and Examined,	Not known.
8. Length of time Insane,	Do.
9. Whether First Attack,	Do.
10. Age (if known) on First Attack,	Crichton Royal Inst^{n} from Dec: 27. 1904.
11. When and where previously under Examination and Treatment (5)	Not known.
12. Duration of Existing Attack,	Senile Decay.
13. Supposed Cause,	Not so far as observed.
14. Whether subject to Epilepsy,	Do.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Do.
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,	
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has been previously in an establishment, state the date of latest admission or approximate thereto. If never 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 March, One thousand nine hundred and five years.

(To be signed by the party applying) Miles McInnes

T. & A. C.—Sept. 1903.

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, Peter Murray Ken, 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) Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) John Grant, Pauper, Crichton Royal Institution, and that the said John Grant, is a (5) person of unsound 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 facile, very childish. Shows great loss of memory & very stupid. Is not clean in his habits.

(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 Ken M.B.C.M.

Place of Abode, 20 Castle Street Dumfries

DATED this twentieth day of March, — One thousand nine hundred and five 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, Charles Donaldson Law being a (1) Licentiate of the Royal College of Physicians and of the Royal College of Surgeons 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) John Grant, a pauper of Crichton Royal Institution, and that the said John Grant is a (5) person of unsound 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 shows marked mental infirmity. He is incoherent. His memory is greatly impaired. He is childish. He mutters continually to himself.

(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, Charles D. Law Crichton Royal Institution

Place of Abode, Dumfries

DATED this thirtieth day of March, — 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, Peter Murray Kerr,
being (1) Graduate of Medicine,
hereby certify, on soul and conscience, that I have this day, at (2) Crichton Rl.
in the County of Dumfries, seen and personally examined
John Grant,
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.

Peter Murray Kerr

DATED this twenty-ninth day of March, One thousand nine hundred and five 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 Grant, 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

Date 29th March 1905.

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

I George Campion, Advocate, Sheriff Substitute of Dumfries and 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 Charles Donaldson Law 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 John Grant, Vagrant, Crichton Royal Institution, Dumfries, (Pauper) and that the said John Grant, 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 Grant 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 John Grant 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 thirty-first day of March, One thousand nine hundred and five years.

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

[Signature] Geo: Campion

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

No. 9366.

John Grant.

(Dumfries)

Adm:
29th March 1905.

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 William Wallace Morrison, Inspector of Poor for the Parish of Kirkcudbright

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Halliday Straiton Jr Labourer, High ~~your Petitioner's~~ (3) Street of the Burgh of Kirkcudbright 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 Halliday Straiton Junior 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) Wm W. Morrison

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

DATED this 30th (4) day of March One thousand ~~eight~~ 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,	Halliday Straiton Junior
2. Sex and Age,	Male - 26 years.
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,	
7. Place where Found and Examined,	High Street Kirkcudbright
8. Length of time Insane,	Has suffered from Epileptic fits for a long time
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*],	Not previously under Examination
12. Duration of Existing Attack,	
13. Supposed Cause,	Epileptic fits
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if Pauper) is Chargeable,	Kirkcudbright Parish
18. Date of becoming Chargeable,	30th March 1905.
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,	Halliday Straiton Junior, High Street Kirkcudbright, Labourer, Father. No other member of family 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 Thirtieth day of March One thousand ~~eight~~ nine hundred and five.

(To be signed by the party applying) Wm W. Morrison

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, Wm Johnstone
being a (1) M.R. 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) High St
Kirkcudbright in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Halliday Straiton Pauper
Labourer High St, Kirkcudbright and that
the said Halliday Straiton is a (5) person of unsound 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 to severe Epi
attacks ~~of~~ and remain
a very irritable violent state for some

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

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

His brother informs me that he
dangerous & more or less with
& violently tears his clothes &

Name and Medical Designation, Wm Johnstone M.R.

Place of Abode, Kirkcudbright

DATED this 30 day of March One thousand eight 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, Wm Swinton Spence Reid
being a (1) Graduate in medicine 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) High St
Kirkcudbright in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Halliday Straiton pauper
Labourer. and that
the said Halliday Straiton is a (5) person
of unsound 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 a chronic epileptic and
lately has shown signs of marked
deterioration of brain power.

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

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

Wm. Johnstone M.R.C.S. Leith fellow workmen
in the words tells me he is very violent during
the steps of his fits & has tried to do him
both serious bodily injury

Name and Medical Designation, W.S.S. Reid M.B.C.M. Edin. Glas. Hon. Cour.

Place of Abode Oakley Kirkcudbright

DATED this 30th day of March One thousand eight 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,
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 Swinyard Napier Esquire, Advocate, Sheriff ~~of the~~ (3) Substitute of Dumfries and Galloway at Kirkcudbright having had produced to me, with a Petition at the instance of (3) William Wallace Morrison, Inspector of Poor for the Parish of Kirkcudbright Certificates under the hands of William Johnstone, M.D., ——— and William Swanston Spence Reid, M.R.C.V.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) Halliday Straiton, Junior, pauper, and that the said Halliday Straiton, 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 Halliday Straiton, Junior 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 Halliday Straiton, Junior, which accompanied the said Petition.

(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.

DATED this Sixty first day of March One thousand ~~eight~~ Nine hundred and five.

Lawrence J. Napier

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

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

No. 9364.

Halliday Straiton jun:
(Kirkcudbright)
Adm: 1st April 1905.

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 Miss Sarah Isabella McClean, 333 Beverley Road, Hull.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George McClean, 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 George McClean, 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 Isabella McClean

(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 April, — One thousand nine hundred and five 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 McClean.
2. Sex and Age,	Male: Age 41 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,	Protestant.
6. Previous Place of Abode,	333 Beverley Road, Hull.
7. Place where Found and Examined,	Scalebor Park Burley in Wharfedale, Yorks.
8. Length of time Insane,	7 years.
9. Whether First Attack,	Fourth.
10. Age (if known) on First Attack,	28 years.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution 1900, The Lawn Lincoln 1901-1903. Scalebor Park 1903, to date.
12. Duration of Existing Attack,	6 years.
13. Supposed Cause,	Not known.
14. Whether subject to Epilepsy,	Not.
15. Whether Suicidal,	Not.
16. Whether Dangerous to others,	May become so.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not 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 McClean, sister 333 Beverley Road, Hull. a brother.
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 its name, and date of latest admission or approximate date 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 Fourth — day of April, — One thousand nine hundred and five years.

(To be signed by the party applying) S. I. McClean

T. & A. C.—Sept. 1903. 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 Rutherford Gilmour, being a (1) Fellow of the 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) Scaleby Park, Burley in Wharfedale, in the County of Yorkshire, separately from any other Medical Practitioner, visited and personally examined (4) George McClean, medical practitioner, formerly of 333 Beverley Road Hull and that the said George McClean, is a (5) person of unsound 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 state of chronic mania with delusions. He sits in a corner constantly muttering to himself all day. Such expressions as – thieves vagabonds murderers –. He refuses to reply to any questions. He is readily made excited and abusive.

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

Name and Medical Designation, J. R. Gilmour F.R.C.P.Ed

Place of Abode, Scaleby House Burley in Wha

Dated this third day of April, 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.

(6) *State the facts.*

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

I, the undersigned, Robert Honey Watt, being a (1) Bachelor of Medicine & Surgery of the Univ 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 Ro Institution, Dumfries, in the County of separately from any other Medical Practitioner, visited and personally examined (4) George McClean of 333 Beverl Road, Hull, and that the said George McClean, is a (5) person of unsound 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 mutters constantly to himself. When spoken to, he talk wildly & incoherently, shouting out that we are ha He is very excitable, merely looking at him, ca him to shout out abusively. –

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

Name and Medical Designation, Robert H. Watt M.B., B.Ch.

Place of Abode, Dumfries & Galloway Royal Infirmary

Dated this fourth day of April, 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, John Rutherford Gilmour
being (1) Fellow of the Royal College of Physicians in Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Dalston Park Burgh in Cumberland
in the County of ~~Dumfries~~, , seen and personally examined George McClean, , 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 Scotland.
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. R. Gilmour

DATED this third — day of April, — One thousand nine hundred and five 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 George McClean, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Sarah Isabella McClean

Date 3rd April 1905.

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

I, George Sampson (1) Sheriff-Substitute of the ~~Sheriffdom~~ Dumfries and Galloway, ~~of Dumfries~~, having had produced to me, with a Petition at the instance of (2) Mrs Sarah Isabella McClean, 333 Beverley Road, Hull, Certificates under the hands of John Rutherford Gilmour and Robert Howard 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 (4) George McClean, Medical Practitioner, 333 Beverley Road, Hull, (Sister's Brother), and that the said George McClean 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 McClean as a Patient into the (6) 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 George McClean, 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 April, One thousand nine hundred and five years.

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

[Signature] Geo. Sampson

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

No. 9368.

George McClean.

Adm: 4 April 1905.

N.B.—*This Form shall remain in the keeping of the Superintendent of the Asylum until the order of the Sheriff is examined.*

[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 John Killip ———

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that William Killip ———

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

your Petitioner's (1) 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 authorise the transmission of the said William Killip ——— to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(To be signed by the Party applying) John Killip ——— X Sig. here

1 The date of the Petition must be within fourteen clear days following the dates of the Medical Certificate.

DATED this Eighth (2) day of April One thousand ~~nine~~ eight 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,	William Killip.
2. Sex and Age,	Male 55
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any).	Farmer
5. Religious persuasion, so far as known,	Wesleyan Methodist
6. Previous Place of Abode,	Curragh, Sulby Glen. Isle of Man
7. Place where Found and Examined,	Thang. Braddan, Isle of Man
8. Length of Time Insane,	10 years
9. Whether First Attack,	yes
10. Age (if known) on First Attack,	45 years
11. When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	Isle of Man asylum admitted
12. Duration of Existing Attack,	10 years
13. Supposed Cause,	a fright
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	Has been suicidal: .
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 the Family known to be or to have been Insane,	John Killip Curragh Sulby Glen Isle of man. Has a sister an Imbecile
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 Seventh — day of April — One thousand ~~eight~~ nine hundred and five

(To be signed by party applying) John Killip ——— X Sig. here

MEDICAL CERTIFICATE No. I.

I, the undersigned William Richardson being a (1) Doctr of Medicine of the University of Dublin and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) the Lunatic Asylum, Strang. Braddan in the County of Man separately from any other Medical Practitioner, visited and personally examined (4) William Killip. Farmer of Curragh Sulby Glen, Isle of Man and that the said William Killip is a (5) person of unsound 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 been under my care since 25 Sept 1895. Suffering from Melancholia. He made an attempt to commit suicide on 10 Feb 1896 by inserting a piece of broken Crockery in his pharynx. Of late years he has not made any such attempts but has lately developed an inclination to be violent and strike Me with no provocation. Informs me he has threatened to take his life

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

Name and Medical Designation, W Richardson M.D.
Place of abode, Braddan. Isle of Man

Dated this 6 day of April One thousand nine ~~right~~ hundred and five

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

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

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

(4) *Insert 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 Mackenzie being a (1) Doctor of Medicine of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Lunatic Asylum Strang ~~County~~ Braddan in the Isle of Man separately from any other Medical Practitioner, visited and personally examined (4) William Killip, Farmer of Curragh, Sulby Glen, Isle of Man and that the said William Killip is a (5) Person of Unsound 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 greatly depressed; cannot tell his age does not know whether he has been in the Isle of Man Stirling for five years or more; states that he has his choice he would sooner remain in the Asylum

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Percy Harold Smith, an Attendant, states that William Killip has threatened to take his (Smith's) life that he lays in wait for him, & has on more than one occasion struck him.

Name and Medical Designation, Thomas Mackenzie. M.D.
Place of abode, Lezayre Ramsey Isle of Man

Dated this sixth day of April One thousand nine ~~eight~~ hundred and five.

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

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

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

(4) *Insert 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 William Richardson, being (1) a Doctor of Medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) the Lonely Asylum, Strang, Braddan in the Island of Man, seen and personally examined William Killip, 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 6 day of April One thousand ~~eight~~ nine hundred and five years

W. W. Richardson M.D.

(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 Killip to whom the foregoing certificate of emergency refers.

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

Signature and Address, John Killip · Curragh Sulby Glen Isle of Man

Date, 7th April 1905

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) John Killip, Curragh, Sulby Glen, Isle of Man. Certificates under the hands of William Richardson and Thomas 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 (2) William Killip, Curragh, Sulby Glen, Isle of Man, (Petr. brother) and that the said William Killip 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 William Killip 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 William Killip 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 Eighth day of April One thousand ~~eight~~ nine hundred and five years. Five words deleted

Geo: Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9369

Name, William Killip.

Date of Admission, 9th April 1905.

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 A. J. West,
5 Willcott Road, Acton Hill, London; ——

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that William Whitney Faris, ——

(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 Whitney Faris, — to the Richton Royal Institution, — and to sanction his admission into the said Asylum.

(To be signed by the Party applying) A. J. West

(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 April, One thousand nine hundred and five 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 Whitney Faris.
2. Sex and Age,	Male. 31. Years of age.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Medical Student.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Dublin.
7. Place where Found and Examined,	Lindville. Cork.
8. Length of time Insane,	6 Years.
9. Whether First Attack,	Yes first attack.
10. Age (if known) on First Attack,	25
11. When and where previously under Examination and Treatment (5)	Previous Asylum.
12. Duration of Existing Attack,	Suffering.
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,	W. J. West. Brother
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,	5 Willcott Road Acton Hill London.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Organic Disease in Family. —

(5) If patient has previously in an Asylum, state date of latest admission approximately. If previously under Treatment or treatment out of fact.

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

Dated this Eighth day of April, — One thousand nine hundred and five years.

(To be signed by the party appiying) W. J. West

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, Oscar Woods
being a (1) Doctor of Medicine Trinity College Dublin,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) Lindville Cork, in the County of Cork, separately from any other Medical Practitioner, visited and personally examined (4) William Whitney Faris and that the said Wm Whitney Faris, 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)
Will not employ himself Denies he is unwell in anything, rambling & incoherent in conversation Memory very bad - generally unkempt

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs McKenzie (Matron) Lindville
At times excited, & quite unkempt.

Name and Medical Designation, Oscar Woods

Place of Abode, District Asylum Cork

DATED this fifth (5th) day of March — One thousand nine hundred and five April 5th

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, W Walker,
being a (1) Licentiate of the Royal College of Physicians 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) Lindville Blackrock Road, in the County of separately from any other Medical Practitioner, visited and personally examined (4) William Whitney Faris, and that the said William Whitney Faris, is a (5) person of unsound 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 incoherent in conversation & is very delusional, thinks that he cannot correspond with his mother "without a licence" Is incapable of grasping the import of any question put to him

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The matron, Lindville, Cork, says that he is very uncertain in his moods & has delusions about his right of communicating with his relatives & is in turn suicidal &c

Name and Medical Designation, W Walker M.D.

Place of Abode, Lindville, Cork

DATED this 5th day of April, — 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, H. Walker being (1) a Licentiate of the Royal College of Physicians of Ireland hereby certify, on soul and conscience, that I have this day, at (2) Lindville in the County of Cork, seen and personally examined William Whitney Faris 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, 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.

H. Walker M.R.C.S.

DATED this third day of April, 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 Asylum to receive therein William Whitney Faris, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address M. J. West
5th April 1905
5 Willcott Road Acton Hill London W.

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 (4) Mrs M. J. West, 5 Willcott Road, Acton Hill, London, Certificates under the hands of Oscar Woods, and H. V. Walker, 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) William Whitney Faris, Lindville, Blackrock Road, Cork, Ireland and that the said William Whitney Faris is a (6) 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 William Whitney Faris 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 William Whitney Faris, which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) 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 Tenth day of April One thousand nine hundred and five years. - Three 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. 9370.

William Whitney Paris

Adm: 8th April 1905.

B.—*This Form shall be kept in the keeping of the Superintendent of the Asylum to be Order of the Sheriff is issued.*

[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,— Sat Dumfries:

The Petition of George Rae Inspector of Poor of the Parish of Wamphray Moffat.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Helen Smith, ~~Gentstockings Cottage~~ Newbigging Wamphray, your Petitioner's (1) 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 Smith 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.

(To be signed by the Party applying) George Rae Inspector of Poor

DATED this nine the third (2) day of April, One thousand ~~eight~~ hundred and five years.

(2) The date of the Petition must be within four-teen 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,	Helen Smith.
2. Sex and age,	F.- 62 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Imbecile from birth.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous place of abode,	Gentockings Cottage Johnstone. Newbegging Wamphray. imbecile from birth.
7. Place where found and examined,	
8. Length of time Insane,	
9. Whether First Attack,	not known. as above.
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,	(first time).
12. Duration of Existing Attack,	gradually getting more unmanageable
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,	Wamphray.
18. Date of becoming Chargeable,	28th March 1905.
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 Smith (brother). Newbegging, Wamphray.
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 March, — One thousand nine hundred and five years.

(To be signed by the Party applying) George Rae Inspector.

P.S. I envision Helen Smith as suitable person of unsound mind to be boarded out. W.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, William Park, 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) Newbigging, Wamphray, Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Helen Smith of (a pauper) Newbigging. Wamphray, Dumfriesshire, and that the said Helen 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)

1. Always tries to avoid meeting people.
2. Knows nothing about her age.
3. Has a very vacant look.

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

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

1. Now that her brother is ill, she will only do as she desires & is no assistance in the house.

Name and Medical Designation, William Park. M.D.

Place of Abode, Johnstone Bridge. Lockerbie

DATED this first day of April One thousand ~~eight hundred and~~ nine hundred and ~~ninety~~ 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, Thomas Brown White, 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) Newbigging Cottage Wamphray, Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Helen Smith, Newbigging Cottage, Wamphray, who is a Pauper and that the said Helen 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)

Goes about listlessly, muttering nonsense to herself takes no interest in anyone or her surroundings Her appearance is that of an imbecile.

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

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

Brother says she is although not violent quite unmanageable in the house, as she does not seem to comprehend anything.

Name and Medical Designation, Thomas Brown White M.B.

Place of Abode, Dickson House - Moffat

DATED this seventh day of April One thousand ~~eight~~ 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, being (1) M.B. and C.M. Edin: University. hereby certify, on Soul and Conscience, that I have this day, at (2) Newbiggin, Wamphray, in the County of Dumfries, seen and personally examined Helen Smith, 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.

Thomas Brown White

DATED this seventh day of April, 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 at Dumfries, to receive therein Helen 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, George Rae

Date, 8th April, 1905.

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) George Rae, Inspector of Poor, Wamphray, Moffat, Certificates under the hands of William Aitken Moffat, and Thomas Brown White, 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) Helen Smith, Newbiggin, Wamphray, Moffat, (a pauper) and that the said Helen Smith 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 Helen Smith 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 Helen Smith 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 Eighth day of April One thousand ~~eight hundred and~~ nine hundred and five years. Six printed words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9391

Name, Helen Smith
(Hamptonian)

Date of Admission, 8th April 1905.

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~~ Dumfriesshire ~~Galloway~~ and his Substitutes,— at Dumfries.

The Petition of Sarah Taylor Cassie Ruthvford, Burn House, Moffat.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Christina Ruthvford, 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 Christina Ruthvford, 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*) Sarah Taylor Cassie Ruthvford

DATED this Tenth (4) day of April, — 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,	Mary Christina Ruthvford.
2. Sex and Age,	Female. 48.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Assists in Housework.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Burn House, Moffat.
7. Place where Found and Examined,	Burn House, Moffat.
8. Length of time Insane,	1 Year and 10 months
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	23.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution.
12. Duration of Existing Attack,	1 Year and 10 months
13. Supposed Cause,	Mental Worry.
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,	Sarah Taylor Cassie Ruthvford Burn House. Moffat. Sister. None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

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

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

DATED this Tenth — day of April, — One thousand nine hundred and five.

(*To be signed by the party applying*) Sarah Taylor Cassie Ruthvford.

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, being a (1) Thomas Brown White M.B. & C.M. of Edinb. 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) Burn House, - Moffat, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Christina Rutherford, Burn House, Moffat, and that the said Mary Christina Rutherford is a (5) person of unsound 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)

Very restless, Goes muttering about house. Has idea that she has been trained as a professional nurse & says she has a press full of Medical b which she constantly reads, but does not.

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

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

Sister says she is very difficult in the house Takes dislikes to people without cause, Goes muttering about, and often uses very bad lan

Name and Medical Designation, Thomas Brown White

Place of Abode, Dickson House - Moffat

DATED this tenth day of April, 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, George Robert Livingston, being a (1) Doctor of medicine of Edinburgh & Louvain 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, Dumfries, in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Christina Rutherford, Crichton Royal Institution, Dumfries, and that the said Mary Christina Rutherford is a (5) person of unsound 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 manner & appearance
Her rambling incoherent conversation
Talking continually about rivers she has crossed & lakes she has passed through.

(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 M.B.

Place of Abode, 47 Castle Street Dumfries

DATED this tenth day of April, 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, George Robert Livingston, —
being (1) doctor of medicine of Edinburgh; —
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 Mary Christina Rutherford — , 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.
Mary Christina Rutherford
(3) State place at which Asylum is situated.

George R. Livingston M.D.

Dated this tenth — day of April, — 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 Mary Christina Rutherford, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Sarah T. C. Rutherford

Date 10th April 1905

Burn House
Moffat.

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

I, George Campion, Advocate, Sheriff Substitute of (1) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Sarah Taylor Burnie Rutherford, Burn House, Moffat, — Certificates under the hands of Thomas Brown White — 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 Mary Christina Rutherford, Burn House, Moffat (Petn's Sister) and that the said Mary Christina Rutherford 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 Christina Rutherford 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 Mary Christina Rutherford, 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 April, One thousand nine hundred and five years.

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

[Signature] Geo. Campion

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

No. 9892.

Mary Christina Rutherford

Adm: 10 April 1905.

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 Rev. James C. Gillespie. Kirkgunzeon Manse

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Ewer Gillespie

(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 George Ewer Gillespie to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(To be signed by the Party applying) James C. Gillespie

(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 nine hundred and five 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 Ewer Gillespie.
2. Sex and Age,	Male. 35 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Clerk.
5. Religious Persuasion, so far as known,	Church of Scotland.
6. Previous Place of Abode,	Kirkgunzeon Manse
7. Place where Found and Examined,	"
8. Length of time Insane,	Two years.
9. Whether First Attack,	
10. Age (if known) on First Attack,	33 years.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Two years.
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,	Rev. James C. Gillespie. Kirkgunzeon Manse. (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 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 Twelfth day of April — One thousand nine hundred and five years.

(To be signed by the party applying) James C. Gillespie

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, Frederick Hugh Clarke
being a (1) Bachelor of Medicine and Master in Surgery 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) Kirkpuncon House, Kirkpuncon in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) George Ewer Gillespie, formerly a clerk, Kirkpuncon House and that the said George Ewer 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) He is morose depressed. Suspicious of those about him. Careless and dirty in person, and childish in Conversation. He refuses to leave his bedroom for weeks together at a time though able to do so.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His father, Rev^d James E. Gillespie, Kirkpuncon Manse. Says he annoys the household by loud talking at night, and on several occasions has been violent

Name and Medical Designation, Fred: Hugh Clarke, M.B.C.M.

Place of Abode, Charlotte Street Dumfries

DATED this eleventh day of April One thousand nine hundred and five 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 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) George Ewer Gillespie Clerk, Kirkpuncon House, Kirkcudbright and that the said George Ewer 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)
His insane appearance and manner
He is depressed & animable: believes that
he is lost both body & soul.
Has marked tremor in his speech

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 thirteenth day of April One thousand nine 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, Frederick Hugh Clarke.
being (1) Bachelor of Medicine & Master in Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Kirkgunzeon
in the County of Kirkcudbright, seen and personally examined
George Ewer 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.

Fred: Hugh Clarke M.B.C.M.

DATED this eleventh day of April One thousand nine hundred and five 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 George Ewer Gillespie to whom the foregoing Certificate of Emergency refers.

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

Signature and Address James E. Gillespie

Date 12 April 1905.

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 (1) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) James E. Gillespie, Kirkgunzeon House, Kirkgunzeon, Certificates under the hands of Frederick Hugh Clarke, 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) George Ewer Gillespie, Kirkgunzeon House, Kirkgunzeon, Peterson, Son) and that the said George Ewer Gillespie 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 George Ewer Gillespie 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 George Ewer 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.
(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 fifteenth day of April, One thousand nine hundred and five years.

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

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

[Signature] Geo. Campion

No. 9373.

George Ewer Gillespie.

Adm: 12 April 1905.

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 John England Inspector of Poor of the Parish of Sorbie and residing at Garlieston

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Cowan, a pauper chargeable (3) to Kirkinner Parish, residing at Cults parish of Sorbie 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 Cowan 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*) John England

(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 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,	William Cowan
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	never fit for any occupation
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Broadwigg Parish of Whithorn
7. Place where Found and Examined,	Cults, Parish of Sorbie
8. Length of time Insane,	Weakminded from Birth
9. Whether First Attack,	Bounded out as a lunatic in
10. Age (if known) on First Attack,	Private Dwelling.
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,	Epilepsy
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Kirkinner
18. Date of becoming Chargeable,	has been chargeable for 8 years.
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 Cowan Father Brothers Sisters weakminded.
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 eleventh day of April One thousand nine hundred and five

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

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.

(6) *State the facts.*

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

I, the undersigned, James Fleming Smith
being a (1) Bachelor of Medicine & Master of Surgery of Edin. Univ.
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Crail
parish of Forbie
Aberdeenshire in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Cowan pauper
Crail and that
the said William Cowan is a (5) person of unsound 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 blank vacant imbecile look, replies in a childish way to questions, is impulsive.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His mother Mrs Sarah Brown or Cowan informs me that he occasionally takes convulsions that he is generally quiet but is easily roused. He never could dress himself & he cannot do anything

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

Place of Abode, Peterhead

DATED this eleventh day of April One thousand nine hundred and five

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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, Gilbert Arthur Welsh
being a (1) Doctor of Medicine of 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) Crail
Parish of Rankin
Highlands in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Cowan, pauper
Crail and that
the said William Cowan 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 suffers from Epilepsy, is childish excitable in temper and impulsive. I notice he suffers from attacks of Petit Mal & is dangerous to others & himself

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His mother Sarah Brown or Cowan tells me he wanders from home takes convulsions easily excited, during these he assaults & knocks down human beings

Name and Medical Designation, Gilbert A. Welsh M. D.

Place of Abode The Asylum Peterhead

DATED this Eleventh day of April 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,
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 Esquire (1) Sheriff Substitute
of ~~the~~ (2) Dumfries and Galloway ~~of~~
having had produced to me, with a Petition at the instance of (3) John Lingland Inspector of Poor of the Parish of Lorbie and residing at Carlistown Certificates under the hands of James Fleming Smith M.R.C.S.E. Whithorn and Gilbert Aitken Kelsh M.D. Carlistown, 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 Cowan Pauper and that the said William Cowan 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 Cowan as a Patient into the (6) Southern Counties Asylum of 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 William Cowan 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 eleventh day of April One thousand ~~eight~~ nine hundred and five.

Wm Mackie

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

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

No. 9374.

William Cowan.

(Kirkinner)

Adm: 12 April 1905.

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 Henry Mc Kie Painter King St Castle Dougeas

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Mc Kie 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 Jane Mc Kie 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) Henry Mc Kie

(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 April One thousand nine hundred 05

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 Mc Kie
2. Sex and Age,	Female. 60
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Grocer
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	King St. Castle Dougeas
7. Place where Found and Examined,	King St. Castle Dougeas
8. Length of time Insane,	one week
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	60
11. When and where previously under Examination and Treatment (5)	—
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,	Henry Mc Kie, King St. Castle Dougeas. None of family ever insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Establishment, state it, 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 13th day of April One thousand nine hundred 05

(To be signed by the party applying) Henry Mc Kie

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.*

I, the undersigned, Robert B. Lorraine
being a (1) Graduate of Edinburgh University
and being in actual practice as a (2) Physician & Surgeon 130 King Street
do hereby certify, on soul and conscience, that I have this day, at (3) Castle Douglas
Kirkcudbright in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Jane McKie, 130 King Street Castle Douglas and that
the said Jane McKie is a (5) person of
unsound 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 melancholy & dull, refuses to speak. says she is Bankrupt & has no means remains in one position a long time rocking herself to & fro.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her son says she fancies herself without money refuses to take food or to speak. under dull and depressed weather type

Name and Medical Designation, Robert B. Lorraine M.B. CM. Edin

Place of Abode, Castle Douglas N.B.

DATED this twelfth day of April 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, David Charles Welch.
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) 130 King Street.
Castle Douglas.
Kirkcudbright in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Jane McKie
130 King St. Castle Douglas. and that
the said Jane McKie is a (5) person of
unsound 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 lies in bed refusing to speak. She is able to hear when spoken to as indicated by her looking at the speaker. otherwise she will lie in confusion. I found she has been passing water in the bed.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
I understand from her own that she has recently behaved in a peculiar manner. She imagines she has bankrupt and sent for her son and her banker in order to take steps accordingly. The bankruptcy was not the case. For the last week I am told she has been in the condition in which I have myself seen her.

Name and Medical Designation, D. Chas Welch

Place of Abode Castle Douglas.

DATED this twelfth day of April One thousand nine hundred 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,
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, Elliot Francis Mure, Esquire (1), Sheriff Substitute of ~~the (2) Stewartry~~ of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Mary McKie Painter, King Street, Castle Douglas Certificates under the hands of Robert Rae Lorraine, M.B.C.M., and David Charles Welsh 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) Jane McKie, 130 King Street, Castle Douglas and that the said Jane McKie 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 McKie as a patient into the Crichton Royal ~~Asylum of~~ Institution, Dumfries and I authorize you for Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane McKie 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 Thirteenth day of April One thousand nine hundred and five.

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

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

[*Signature*] Elliot F. Mure

No. 9345.

Jane McKie.

Adm: 18 April 1905.

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 Harrison Beaty.

11 Sunningfield Crescent, Hendon, London;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Whitham Beaty —

(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 John Whitham Beaty — to the Crichton Asylum, Dumfries, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) William Harrison Beaty

(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 April, — One thousand nine hundred and five 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 Whitham Beaty.
2. Sex and Age,	male - 30.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Clerk in G.P.O. London.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	11 Sunningfield Crescent Hendon. London N.W.
7. Place where Found and Examined,	15. Ratcliffe Place. Keswick.
8. Length of time Insane,	From about X mas. last.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	none.
12. Duration of Existing Attack,	about 3 months.
13. Supposed Cause,	unknown. possibly overstrain.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	not up to present time.
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,	Hannah Beaty. 11 Sunningfield Crescent. Hendon. London. N.W. — no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Asylum, Hospital, or Licensed House, state, as far as known, date of latest admission thereto. If patient was previously under Treatment as an Out-patient, state the fact.

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

DATED this Fifteenth day of April, — One thousand nine hundred and five years.

(*To be signed by the party applying*) William Harrison Beaty

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, Robert Kay Barbour Crawford 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) 15 Rotelay Place, Keswick, in the County of Cumberland, separately from any other Medical Practitioner, visited and personally examined (4) John Whitham Beaty — Settle Cottage, 11 Cunningfield Crescent, Kendal, London and that the said John Whitham Beaty, is a (5) person of unsound 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 his mother was dead (which is un
2 Also that he had left his work without leave,
that they were coming from the office to take him

(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 Kay Barbour Crawford M.B.C.M.

Place of Abode, Brundholme House. Keswick

DATED this Fifteenth day of April, 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.

(6) *State the facts.*

I, the undersigned, Frederick Hoyle 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) The Crichton Institution, Dumfries, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Witham Beaty, Settle Cottage 11 Cunningfield Crescent. Kendon, London, — and that the said John Witham Beaty, is a (5) person of unsound 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 melancholy. Can only with difficulty be got to speak, and gives contradictory answers to same questions. His appearance and demeanour are those of an insane person.

(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 Hoyle Clarke M.

Place of Abode, Charlotte Street, Dumfries

DATED this Eighteenth day of April, One thousand nine 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, Robert Kay Barbour Crawford, being (1) Bachelor of Medicine, hereby certify, on soul and conscience, that I have this day, at (2) Berwick — in the County of Cumberland —, seen and personally examined John Whitham Beaty, 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 K B Crawford

DATED this 15th day of April, — 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 Asylum ~~Asylum~~ to receive therein John Whitham Beaty to whom the foregoing Certificate of Emergency refers.

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

J A Beaty

Signature and Address 11 Sunningfield Crescent Hendon London N.W.

Date 15th April 1905.

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

I, George Lamb, 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) William Harrison Beaty, 11 Sunningfield Crescent, Hendon, London, Certificates under the hands of Robert King Barbour Crawford and Frederick Hughes 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 (3) John Whitham Beaty, 11 Sunningfield Crescent, Hendon, London, (brother) and that the said John Whitham Beaty, 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 Whitham Beaty 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 John Whitham Beaty — 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 Eighteenth day of April One thousand nine hundred and five years. Two printed words deleted

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

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

[Signature] Geo. Lamb

No. 9346.

John Whitham Beaty.

Adm: 15 April 1905.

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 Clarke, Inspector of Poor, Lochmaben;

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret McGeorge, 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 McGeorge — to the Southern Counties Asylum, 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) William Clarke

(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 April, — 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,	Margaret McGeorge.
2. Sex and Age,	Female - 65 years.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Dress maker
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	20 Princes St, Lochmaben.
7. Place where Found and Examined,	2 St ~~Dod~~ Dumfries,
8. Length of time Insane,	Eight days.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	49 years.
11. When and where previously under Examination and Treatment (5)	Southern Counties Asylum.
12. Duration of Existing Attack,	Eight days
13. Supposed Cause,	Sickness of guardian.
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,	Mrs Violet Conchie, Afforville, Girvan. Sister. 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 and date of latest order or appeal. If not there. If previously under Inspection or treatment, state fact.

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

DATED this 17th day of April, — One thousand nine hundred and five.

(To be signed by the party applying) William Clarke

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, Mcnaught Reid, being a (1) Doctor of Medicine of Glasgow Univ and being in actual practice as a (2) General Medical Practi do hereby certify, on soul and conscience, that I have this day, at (3) 20 Princes Street, Rochmaben, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret McGeorge 20 Princes Street, Rochmaben, pauper, and that the said Margaret McGeorge is a (5) person of unsound 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 shouting banging at the top of her voice, says she is being shamed and abused, that she was brought to 20 Princes Street, Rochmaben to be killed and that there are loc magnetic bars under her bed all steaming all of a an electric one

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Jessie Clarke her husband guardian says she has kept shouting all night that she is being cursed and that they want to get the insurance money during the night to help her

Name and Medical Designation, Mcnaught Reid M.

Place of Abode, Rochmaben

DATED this 17th day of April, — 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.

(6) *State the facts.*

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

I, the undersigned, Charles Donaldson Law being a (1) Licentiate of the Royal College of Surgeons and Royal College of Physicians Edinburgh and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) Cuchlon Royal Institution, in the County of Dumfries ~~shire~~ separately from any other Medical Practitioner, visited and personally examined (4) Margaret McGeorge, pauper of 20 Princes Street, Rochmaben, and that the said Margaret McGeorge, is a (5) person of unsound 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. She is the subject of acute mental excitement. II. She is incoherent, and her attention can be arrested for only a few moments at a time III. She expresses delusions e.g. people want to obtain all her money. IV. She is very restless.

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

Name and Medical Designation, Charles D. Law.

Place of Abode, Cuchlon Royal Institution Dumfries

DATED this 17th day of April, — 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, Neil Reid
being (1) a Doctor of Medicine of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) 20 Princes St Lochmaben,
in the County of Dumfries, seen and personally examined
Margaret McGeorge, 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.

Neil Reid. M.D.

DATED this 17th day of April — 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 Margaret McGeorge, — to whom the foregoing Certificate of Emergency refers.

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

Signature and Address William Clark, 53 High St Lochmaben

Date 14th April 1905.

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 ~~of~~ at Dumfries,
having had produced to me, with a Petition at the instance of (2) William
Clark, Inspector of Poor, Lochmaben,
Certificates under the hands of Thomas Reid,
and Charles Donaldson Law, — 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 McGeorge, 20 Princes Street, Lochmaben, and that the said Margaret McGeorge, 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 McGeorge 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 Margaret McGeorge, 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 April, One thousand nine hundred and five years. Two printed words delet.

To the Superintendent of the (7) Public
Asylum of Southern Counties, at Dumfries.

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

[*Signature*] Geo: Campion

No. 9399.

Margaret McGeorge.

(Lachnaben)

Admr: 14 April 1905.

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 Burton, 11 Ziggag Road, Lisseard, Cheshire:—

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Burton, ——

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

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 Charles Burton, —— to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Samuel Burton.

(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 April, — One thousand nine hundred and five 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 Burton —
2. Sex and Age,	Male, aged 64, —
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	no occupation, been of weak mind for many years.
5. Religious Persuasion, so far as known,	Protestant (brought up as such)
6. Previous Place of Abode,	Lived at present address for quite 30 years 120 Jarvis Road, Chaste.
7. Place where Found and Examined,	
8. Length of time Insane,	quite 40 years. It has been a gradual creeping on of Imbecility.
9. Whether First Attack,	
10. Age (if known) on First Attack,	
(5) If patient has previously in an Asylum, state date of latest admission or approximate thereto. If never previously under examination or treatment state fact. 11. When and where previously under Examination and Treatment (5)	never been under treatment
12. Duration of Existing Attack,	
13. Supposed Cause,	Supposed to have been caused by his accidently shooting his cousin in early youth.
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,	George Burton. Cherry Willingham Nr Lincoln, full cousin to patient. No other insanity in family as far as Known.
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 Eighteenth day of April, — One thousand nine hundred and five years.

(*To be signed by the party applying*) Samuel Burton

P. p.

T. & A. C.—Sept. 1903.

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 Elliott
being a (1) Member of the Royal College of Physicians in London,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 120 Tarvin Rd, Boughton, Chester, in the County of Chester,
separately from any other Medical Practitioner,
visited and personally examined (4) Charles Burton of 120 Tarvin Rd Boughton, Chester,
and that the said Charles Burton
is a (5) person of unsound 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) Dirty in person. Living alone in a dirty House. Was in the Water Closet when I saw him - would not come out. The only answer I could get to a question was - "No. Quite right. No". Repeated again & again shaking his head. Looking in a vacant manner.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) (Neighbours of Charles Burton)
Samuel Burton 11 Zig-Zag Road. Liscard - Cheshire informs that whenever he visits Charles Burton. He takes relish, often he Cellar a Water Closet & other strange place what he can get to he information from him. He frightens the neighbours at night - they had notice by

Name and Medical Designation, John Elliott. Physician

Place of Abode, 24 Nicholas St. Chester.

DATED this fourteenth day of April, 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, Thos. S. Parry MB (Lond) MRCS (Eng)
being a (1) General Medical practitioner,
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) 120 Tarvin Rd Boughton, Chester, in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Charles Burton, 120 Tarvin Rd of no occupation,
and that the said Charles Burton
is a (5) person of unsound 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) Found him in the water closet. Waited about ½ an hour but could not persuade him to come out; would answer no questions. Eccentric looking man, dirty & unkempt, House filthy and foul smelling. On two former occasions when I visited him he took refuge in the water closet.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Saml. Burton 11 Zig Zag Rd Liscard says: Charles Burton has always been Eccentric; latterly become worse: "I have had a letter from the landlord complaining about him annoying the neighbours".
Eliz. Williams 18 Tarvin Rd says Took after Mr Burton: he sits before the fire for morning & night rarely speaks & never cleans himself: "of a strange comes out the water Closet

Name and Medical Designation, Thos. S. Parry MB (Lond) MRCS (Eng)

Place of Abode, 10 Upton Hartington Rd Chester

DATED this fifteenth day of April, 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, Thom: S Parry
being (1) Bachelor of Medicine London & Member of College of Surgeons England, hereby certify, on soul and conscience, that I have this day, at (2) 120 Varwin Rd Broughton Chester,
in the County of Chester, , seen and personally examined Charles Burton, , 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, & State date of examination.

(2) State place at which Asylum is situated.

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

Thom: S Parry

DATED this 18th day of April, 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 Charles Burton, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Saml Burton 11 Zig-Zag Road Liscard Cheshire.

Date 18th April 1905.

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

I, George Campion, Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) Samuel Burton, 11 Zig Zag Road, Liscard, Cheshire, Certificates under the hands of John Elliott, and Thom: S. Parry, 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) Isabel Burton, 120 Varwin Road, Broughton, Chester, Petitioner's Cousin and that the said Charles Burton, 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 Charles Burton 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 Charles Burton, 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 [at Dumfries] this Nineteenth day of April, One thousand nine hundred and five years.

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

Geo. Campion
[Signature]

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

No. 9348

Charles Burton

Adm: 18 April 1905.

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 Mary E. Hunt, Lobbie Cottage, Warton Bank, nr Kirkham.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Hunt, ——— 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 Thomas Hunt, ——— 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) Mary E Hunt

(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 april, — 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,	Thomas Hunt.
2. Sex and Age,	Male. age 36.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Working Shopkeeper. Clogger Seatsman.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Warton Bank, nr Kirkham.
7. Place where Found and Examined,	Lobbie Cottage Warton Bank. Do.
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)	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	Worry & Overwork, & Study.
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 Hunt Brother Warton Bank, nr Kirkham. none.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Asylum, state when, and date of latest Order, or approximate thereto. If never 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 april, — One thousand nine hundred and five.

(To be signed by the party applying) Mary E Hunt

T. & A. C.—Sept. 1903.

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, Benjamin J. Jones,
being a (1) Licentiate of the Royal Colleges of Physicians & 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) Tubby Cottage Warton Bank, Warton, nr Lytham, in the County of Lancaster,
separately from any other Medical Practitioner, visited and personally examined (4) Thomas Hunt
and that the said Thomas Hunt 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)

Says he was being worried to death by railway & tramway people & has no connection with any such persons. Says that some persons are stuffing him with gas & filth when eats been away, says everybody is wanging him, & that he has no friends, whereas is kindly treated

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

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

Jumped out of railway carriage window whilst train going at 40 per hour, said was tired of riding. Married man but Attaches his brother with fisher feelings persecution, Says any one who sees him a stroke, thinks is some foreign enemy he has friends.

Name and Medical Designation, Benjn Jones LRCPS.
The Avenue
Place of Abode, Freckleton nr Kirkham, L
Dated this fourteenth day of April, 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, Sidney Wigglesworth
being a (1) LRCP. E. & MRCS. E.
and being in actual practice as a (2) Surgeon Tubby Cottage
do hereby certify, on soul and conscience, that I have this day, at (3) Warton,
in the County of Lancaster, separately from any other Medical Practitioner, visited and personally examined (4) Thomas Hunt
and that the said Thomas Hunt is a (5) person of unsound 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 talks incoherently, excited manner & says people & devils keep coming through the fireplace He cannot work because of traitors about.

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

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

John Hunt (his brother) says that he keeps trying to get out of the fireplace because somebody is being buried there & he can't see them.

Name and Medical Designation, Sidney Wigglesworth
Place of Abode, Warton nr Preston
Dated this fourteenth day of April, 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 Benjamin E. Jones, being (1) L.R.C.P. & L.R.C.S. Edin hereby certify, on soul and conscience, that I have this day, at (2) Police Cottage Wanton in the County of Dumfries, seen and personally examined Thomas Hunt, 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.

Benj E Jones

DATED this eighteenth day of April, 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 Thomas Hunt to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Mary Hunt Lobbie Cottage ~~(John Hunt)~~ Wanton Bank Wanton Mr Kirkham

Date April nineteenth One Thousand nine Hundred & five.

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 ~~of~~ at Dumfries, having had produced to me, with a Petition at the instance of (2) Miss Mary E. Hunt, Lobbie Cottage, Wanton Bank, Mr Kirkham, Certificates under the hands of Benj. E. Jones, and Sidney Wigglesworth, 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 Hunt, Lobbie Cottage, Wanton Bank, Mr Kirkham, and that the said Thomas Hunt, is a (4) Lunatic, 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 Thomas Hunt 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 Thomas Hunt, 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 Twentieth day of April, One thousand nine hundred and five years.

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

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

[*Signature*] Geo. Lampion

No. 9349

Thomas Hunt

Adm: 19 April 1905

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) ~~Galloway~~ Dumfries and his Substitutes,— at Dumfries:

The Petition of Janet Cameron,
8 High Street, Lockerbie,
humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Cameron,
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 Isabella Cameron to the D.C. 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) Janet Cameron

(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 April, — One thousand nine hundred and five 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 Cameron.
2. Sex and Age,	Female, - 32 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Teacher.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	8 High St: Lockerbie
7. Place where Found and Examined,	8 High St: Lockerbie
8. Length of time Insane,	about 20 years.
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	32 years.
11. When and where previously under Examination and Treatment (5)	Never under treatment.
12. Duration of Existing Attack,	—
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	—
16. Whether Dangerous to others,	Sometimes.
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 degrees of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Janet Cameron Sister, 8 High Street Lockerbie Sister Marion C. Cameron in Asylum.
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 Medical or Surgical treatment, state the 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 five years.

(To be signed by the party applying) Janet 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, 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) 8 High St. Lockerbie, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Isabella Cameron, 8 High St Lockerbie ——— and that the said Isabella 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 talks incoh I can't give a satisfactory answer to any question at times becomes violent & destructive & her whole conduct & behaviour are emotional.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Sister Mrs. Jessie Cameron informs me that Isabella is awfully destructive & at times so violent as to be dangerous to others.

Name and Medical Designation, George Irving. M.D

Place of Abode, Lockerbie

DATED this nineteenth day of April ——— 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 Honey Watt, ——
being a (1) Bachelor of Medicine & Surgery, ——
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) Isabella Cameron, 8 & 8 High Street Lockerbie, ——— and that the said Isabella 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 talks incoherently & does not answer your questions, she is excitable in her actions & behaves in an indecent 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, Robert Honey Watt M

Place of Abode, Dumfries & Galloway Royal Infir

DATED this Twenty First day of April, ——— 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, George Irving, being (1) Doctor of Medicine & Master in Surgery hereby certify, on soul and conscience, that I have this day, at (2) 8 High St. Lochmaben in the County of Dumfries, seen and personally examined Isabella Cameron, 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.

George Irving M.D

DATED this nineteenth day of April 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 Asylum to receive therein Isabella Cameron to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Janet Cameron
8 High St. Lochmaben

Date 20th April, 1905.

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

I, George Lockhart 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) Janet Cameron, 8 High Street, Lochmaben, Certificates under the hands of George Irving, and Robert Honey 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) Isabella Cameron, 8 High Street, Lochmaben Dumfriesshire, and that the said Isabella Cameron, 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 Isabella Cameron 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 Isabella Cameron, 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 nine hundred and five years.

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

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

[*Signature*] Geo: Lockhart

No. 9880.

Isabella Cameron.

Adm: 20th April 1905.

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 James Morrison, Inspector of Poor Langholm,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Thomson,

(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 Elizabeth Thomson, to the Southern Counties Asylum, Dumfries, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Jas Morrison

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

DATED this 21st (4) day of April, — 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,	Elizabeth Thomson.
2. Sex and Age,	Female. 21 years. (born 18th Mch 1884.)
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,	Drove Road, Langholm.
7. Place where Found and Examined,	Langholm.
8. Length of time Insane,	Six days.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	21 years.
11. When and where previously under Examination and Treatment (1)	"
12. Duration of Existing Attack,	"
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	She threatens sometimes.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Langholm.
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 Janet Thomson 16 Drove Road Langholm. (Aunt).
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 order or appraisement 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 21st day of April, — One thousand nine hundred and five.

(To be signed by the party applying) Jas 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.*

I, the undersigned, John Gill, being a (1) Bachelor of Medicine &c Univ. 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) 15 Drove Road Langholm, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Thomson, 15 Drove Rd Langholm, Pauper, and that the said Elizabeth 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)

Refuses to speak to me and continually made attempts to open the door to escape from the house. Threatened violence to her aunt, & eventually did leave the house by a window. -

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

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

Her aunt Janet Thomson, 15 Drove Road Langholm, tells me that she has frequently threatened violence to her, & has threatened suicide also. She spends everything on dress, will do no work, and wanders about the streets till all hours in the morning

Name and Medical Designation, John Gill M.B., Ch.

Place of Abode, Langholm

DATED this 20th day of April — 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.

(6) *State the facts.*

I, the undersigned, Francis Hendry Rae, being a (1) L R C P & S E, and being in actual practice as a (2) Physician Langholm, do hereby certify, on soul and conscience, that I have this day, at (3) Police Station, Langholm, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Thomson, 15 Drove Road Langholm, Pauper, and that the said Elizabeth 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)

Wild & disordered appearance, excessive restlessness hesitating or incoherent answers to questions.

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

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

Sub Insp Henderson informs me that he has met her at all hours at nights on the Street, takes sudden fainting fits, men frequently associate with her on immoral connection without any reason to cause

Name and Medical Designation, Hendry Rae M.B. Ch.B.

Place of Abode, Langholm

DATED this 21st day of April — 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, John Gill, being (1) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (2) 15 Drove Road, in the County of Dumfries, seen and personally examined Elizabeth 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 qualifications.

(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 Gill M.B.C.M.

DATED this 21st day of April, 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 Elizabeth Thomson 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 Morrison

Date 21 April, 1905.

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

I, George Campion, Esquire, Advocate, Sheriff Substitute of ~~Dumfries, Kirkcudbright and Wigtown~~ (1) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (2) James Morrison, Inspector of Poor, Langholm, Certificates under the hands of John Gill, and Frank Hendry Rae, 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 Thomson, Drove Road, Langholm, (5) and that the said Elizabeth Thomson, 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 Elizabeth Thomson as a patient into the (7) 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 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.

(5) 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-second day of April, One thousand nine hundred and five Years. Five 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. 9381.
Elizabeth Thomson.
(Langholm)
Adm: 21st April 1905.

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 J. Elder Lumsden 52 Jane St. Glasgow

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Oswald Kier Lumsden, 52 Jane Street, Glasgow

(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 Oswald Kier Lumsden to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) J Elder Lumsden

(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 April — 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,	Oswald Kier Lumsden.
2. Sex and Age,	Male. 24 years.
3. Married, Single, or Widowed.	Single.
4. Condition of Life, and previous Occupation (if any),	— Architect.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	7 Broomhill Gdns Partick.
7. Place where Found and Examined,	Glasgow & at Dumfries.
8. Length of time Insane,	Only recently
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	24 years.
If patient has been previously in an Establishment, state date and date of latest admission or application thereto. If never previously under examination or treatment, state fact. 11. When and where previously under Examination and Treatment (5)	Never under treatment before.
12. Duration of Existing Attack,	Only recent.
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Not to my knowledge.
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 Elder Lumsden 52 Jane St. Glasgow. Brother. 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 Twenty second day of April, — One thousand nine hundred and five.

(To be signed by the party applying) J Elder Lumsden

MEDICAL CERTIFICATE, No. I.

I, the undersigned, James Alexander Adams
being a (1) Doctor of medicine 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) 5 Woodside Crescent, Glasgow, in the County of Glasgow separately from any other Medical Practitioner, visited and personally examined (4) Oswald Kier Lumsden. of 52 Dane St. Glasgow, and that the said Oswald Kier Lumsden, is a (5) Person of unsound 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) Stated he had blood coming from his kidneys; that his lungs were bleeding him to death; that he cannot think & lately he wandered into a small hospital I was operating in & asked me there & then to pray for him.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother John tells me he continually consults any doctor whose house he can be passing & wanders into various institutions with no definite purpose.

Name and Medical Designation, James Alex Adams MB

Place of Abode, 5 Woodside Crescent Glasgow

DATED this 21st day of April One thousand nine hundred and five.

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

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

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

(4) *Insert 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, Robert Honey Watt,
being a (1) Bachelor of Medicine & 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) Crichton Royal Institution, Dumfries, in the County of separately from any other Medical Practitioner, visited and personally examined (4) Oswald Keir Lumsden, of 52 Dane Street, Glasgow and that the said Oswald Keir Lumsden, is a (5) person of unsound 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 delusions, he states that he has blood passing from his kidneys, that his lungs are bleeding him to death. He states that he hears voices during the night. He rambles in his conversation

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

Name and Medical Designation, Robert H. Watt MB. Ch

Place of Abode, Dumfries & Galloway Royal Infirmary

DATED this twenty second day of April One thousand nine hundred and five.

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

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

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

(4) *Insert 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, Jas. Alex. Adams
being (1) an M.D. & Glasgow Univ. Ct.
hereby certify, on soul and conscience, that I have this day, at (2) 5 Wood St Ct.
in the County of Glasgow, seen and personally examined
Oswald Kier Lumsden, 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 Alex Adams M.D.

DATED this 21st day of April, — 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 Asylum to receive therein Oswald Kier Lumsden — to whom the foregoing Certificate of Emergency refers.

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

Signature and Address J. Elder Lumsden 52 Jane St Glasgow

Date April 22nd 1905.

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) J. Elder Lumsden, 52 Jane Street, Glasgow, Certificates under the hands of James Alexander Adams, and Robert Wardrop 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 (4) Oswald Kier Lumsden, 52 Jane Street, Glasgow (Patient) and that the said Oswald Kier Lumsden, 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 Oswald Kier Lumsden 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 Oswald Kier Lumsden, — 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 day of April, One thousand nine hundred and five.

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

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

[*Signature*] Geo. Campion

No. 9382.

Oswald Keir Lumsden.

Adm: 22 April 1905.

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 Reid, Inspector of Poor Kilmarnock

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Waddington Lemon

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

your Petitioner's (3) ward 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 Waddington Lemon to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

(To be signed by the Party applying) John Reid

(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 April One thousand nine hundred and five 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 Lemon.
2. Sex and Age,	female. 31 years.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	-
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	112 Titchfield Street Kilmarnock
7. Place where Found and Examined,	112 Titchfield Street Kilmarnock
8. Length of time Insane,	-
9. Whether First Attack,	no
10. Age (if known) on First Attack,	25 years
11. When and where previously under Examination and Treatment (5)	was sent to Ayr District Asylum 20th Jan 1905 transferred to Southern Counties Asylum Dumfries 11th Feb 1905 and was discharged a Recovery has been seven times in Dumfries & Ayr Asylums. first time six years ago
12. Duration of Existing Attack,	unknown
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,	Borbie
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 Thomas Lemon Insurance agent, resides 112 Titchfield Street Kilmarnock not known.
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 fact.

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

DATED this 24th day of April One thousand nine hundred and five years.

(To be signed by the party applying) John Reid

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, Archibald Kerr being a (1) Bachelor of Medicine & Master of Surgeon, 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) 112 Titchfield St. Kilmarnock in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Mary Waddington or Lennox Pauper, 112 Titchfield St. Kilmarnock. 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.:—

(6) *State the facts.*

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

She is suffering from delusion. She says her husband is evil employs her girl as a spy, kissing feiss on the wardrobe, pacing holes with stones. She talks nonsense. She wants to go to Paris and stay there. A day or two ago she thought she saw duty to break two panes of glass in an empty house, to let

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

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

from Husband & Lennox: She is most excitable - can't be kept in the house she is going to Paris for a situation. Talks nonsense and imagines that people are in league with her husband to stop her. Was found wandering at large breaking windows.

Name and Medical Designation, Archibald Kerr M.B.C.M.

Place of Abode, 112 Titchfield Road Kilmarnock.

DATED this twenty fourth day of April 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, Archibald Kerr being a (1) Bachelor of Medicine & Master of Surgeon, 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) 112 Titchfield St. Kilmarnock in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Mary Waddington or Lennox Pauper 112 Titchfield St. Kilmarnock 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.:—

(6) *State the facts.*

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

She suffers from delusions and talks incoherently. She accuses her husband of allowing her to ill-treat her child. She went of a few days ago taking her child with her and broke 2 panes of glass in an empty house with the object of taking the children. She has an idea that the house belongs to her father

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

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

Miss Sarah Lennox She is most excitable and will not stay in the house. She wishes to get away to a situation. She was found a few days ago at large breaking windows

Name and Medical Designation, Archibald Kerr M.B.C.M.

Place of Abode, Caledonia Lodge, Kilmarnock

DATED this twenty fourth day of April 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,
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, James Hood Esqr (1) Sheriff Substitute
of the (2) County of Ayr
having had produced to me, with a Petition at the instance of (3) John Reid Inspector of Poor of the Parish of Kilmarnock Certificates under the hands of Dr. Arch. Mason and And. Reid both of Kilmarnock and 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 Waddington or Lennox. 112. Titfield Street. Kilmarnock and that the said Mary Waddington or Lennox is a (5) Pauper person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Waddington or Lennox as a Patient into the (6) Southern Counties Asylum ~~of~~ 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 Waddington or Lennox which accompanied the said Petition.

DATED [at Kilmarnock] this twenty fourth day of April One thousand nine hundred and five

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

[Signature] James Hood

(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.

GRB

No. 9383.

Mary Paddington Lennox.

Adm: 24th April 1905.

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 John Carson
Inspector of Poor. Kirkmabreck. Creetown.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Thomson

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

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 Elizabeth Thomson to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(To be signed by the Party applying) John Carson

(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 April — One thousand nine hundred and Five 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 Thomson
2. Sex and Age,	~~Sex~~ Female Fifty one 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,	St. John Street Creetown
7. Place where Found and Examined,	St. John Street Creetown
8. Length of time Insane,	On this occasion about a fortnight
9. Whether first Attack,	No
10. Age (if known) on first Attack,	About 31 Years
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution
12. Duration of existing Attack,	about a fortnight
13. Supposed Cause,	Had been ill for some time Became depressed
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,	Kirkmabreck
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 Thomson St. John Street Creetown
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 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 29th — day of April — One thousand nine hundred and five Years

(To be signed by the Party applying) John Carson

T. & A. C.—April 1904.

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.

I, the undersigned, Norman James McKie being a (2) Doctor of Medicine of the University of Edinburgh and being in actual practice as a (3) Doctor of medicine do hereby certify, on soul and conscience, that I have this day, at (4) St John Street Cowtown Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (5) Elizabeth Thomson. St John St Cowtown, pauper and that the said Elizabeth Thomson is a (6) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(7) *State the facts.*

1. Facts indicating Insanity observed by myself: (7)

Her expression indicates melancholia. She weeps when I speak some simple words to her. She often stated that her neighbours were blaming her for killing children

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

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

her sister Mary Thomson

Tried to make away with herself by stuffing the pillow case into her throat. Tries to run out when left by herself without apparent cause or

Name and Medical Designation, Norman James McKie M

Place of Abode, 14 Arthur Street. Newton Stewart

DATED this twenty-fifth day of April One thousand nine hundred and five.

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 Description and Residence, and if a pauper state so.*

(6) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, David Smith being a (2) Bachelor of Medicine & Master of Surgery of the University of Glasgow and being in actual practice as a (3) General Practitioner do hereby certify, on soul and conscience, that I have this day, at (4) St John Street, Cowtown Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (5) Elizabeth Thomson, Pauper, St John Street Cowtown and that the said Elizabeth Thomson 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.:—

(7) *State the facts.*

1. Facts indicating Insanity observed by myself: (7)

Until recently she was most reserved but now is talkative and emotional without being brave in an way. She says she has been bidden God to do things which she cannot do and in consequence has given her up.

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

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

Mrs Sam. Vernon Cross Cottage Cowtown Sister

Recently my sister has become stupid, and latterly has refused food and has neglected herself in which she used to be very diligent. Last night she was walking for a long time and was unable to give any

Name and Medical Designation, David Smith M.B. C.M.

Place of Abode, Park Crescent Cowtown M. B.

DATED this twenty eighth day of April One thousand nine 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, David Smith being (1) Bachelor of Medicine & Master of Surgery (Glas. Univ.) hereby certify, on soul and conscience, that I have this day, at (2) Dalton in the County of Dumfriesshire, seen and personally examined Elizabeth Thomson & John Barson Inspector of Poor, 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.

David Smith M.B. C.M.

DATED this twenty eighth day of April — One thousand nine hundred and five 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 Thomson to whom the foregoing Certificate of Emergency refers.

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

Signature and Address John Barson

Date April 27th 1905.

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

I George Bampton, Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (3) John Barson Inspector of Poor, Kirkmabreck, Dalbeattie, Certificates under the Hands of Norman 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 (4) Elizabeth Thomson, St John Street, Dalbeattie, Pauper and that the said Elizabeth Thomson 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 Elizabeth Thomson as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth 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.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) His, or her.

DATED [at Dumfries] this Second day of May, One thousand nine hundred and five years.

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

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

[Signature] Geo. Campbell

No. 9384.

Elizabeth Thomson.

(Kirkcudbright)

Adm: 29 April 1905.

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: Tollows, and his Substitutes,— at Dumfries:

The Petition of Geo. M'Farlan, Inspector of Poor, Closeburn;

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Robertson, 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 Robertson, to the Southern Counties, Asylum, Bunf, 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) Geo. M'Farlan

(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 March One thousand nine hundred and fine. -

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 Robertson.
2. Sex and Age,	Male— 80 years.
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous Occupation (if any),	Labourer.
5. Religious Persuasion, so far as known,	Prott.
6. Previous Place of Abode,	Penpont.
7. Place where Found and Examined,	Closeburn Hall Gardener's Cottage.
8. Length of time Insane,	1 week. (markedly)
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	Not known.
11. When and where previously under Examination and Treatment (5)	Royal Crichton, Dumfries.
12. Duration of Existing Attack,	1 week.
13. Supposed Cause,	None.
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,	Mauntine Closeburn.
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,	Adam Robertson - Closeburn Hall Gardner - Son.— 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 date of latest admission or approximation 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 1st — day of May, — One thousand nine hundred and fine.

(To be signed by the party applying) Geo. M'Farlan

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, Hugo Rylon — 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) Closeburn Gardens, Closeburn, Dumfries, — in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Robertson, Closeburn Gardener, Pauper and that the said John Robertson, — is a (5) person of unsound 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 confuses time and place — mistakes proper names e.g. says that his daughter in law in the grandmother — that he has only been resident with her a few weeks cannot remember when he was before he came here.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Jon Adam Robertson Gardener Closeburn Gardens tells me that he called on Saturday afternoon last & was told by Mrs Robertson that her husband was dressed — was going away that he was to be buried — was threatening generally that her daughter in law & grand daughter Corrie ate Adam Robertson

Name and Medical Designation, Hugo Rylon Med Off

Place of Abode, Thornhill Dumfries shire

Dated this Second day of May, — 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.

(6) *State the facts.*

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

I, the undersigned, Sidney John Cullum — being a (1) Bachelor of Medicine & Surgery 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) The Crichton Royal Institution, Dumfries, — in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Robertson, Pauper, Closeburn, and that the said John Robertson, — is a (5) person of unsound 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 suffering from Senile Dementia. His conversation is rambling & incoherent. He is very irritable & unruly. His habits are filthy & depraved.

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

Name and Medical Designation, Sidney John Cullum M.B. C

Place of Abode Crichton Royal Institution Dumf

Dated this Second — day of May, — 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, Mungo Bryson
being (1) Doctor of Medicine and Member of Society,
hereby certify, on soul and conscience, that I have this day, at (2) Closeburn Gardens,
in the County of Dumfries. , seen and personally examined
John Robertson,
, 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.

Mungo Bryson

DATED this Second day of May, — 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 John Robertson to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Guardian — Insp. of Poor

Signature and Address Geo. McFarlan

Date 2nd May 1905.

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

I, George Lampon, 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) Geo: McFarlan, Inspector of Poor, Closeburn, Certificates under the hands of Mungo Bryson and Sidney John Cullen, — 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 Robertson, Closeburn Gardens, Closeburn, and that the said John Robertson, — 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 Robertson — as a patient into the (5) Public Asylum of Southern Counties, 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 Robertson, — 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 Third — day of May One thousand nine hundred and five years.

To the Superintendent of the (6) Public
Asylum of Southern Counties, at Dumfries.

[Signature] Geo: Lampon

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

No. 9385.

John Robertson
(Clowburn)

Adm: 2 May 1905.

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~~ of Dumfries & Galloway, *and his Substitutes,*—

The Petition of Alexander Kater Asst. Scottish Labour Corpl. Mid-Lochanwoods, Ruthwell; at Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Christopher Ellis, Colonist

(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 Christopher Ellis, to the Crichton asylum, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Alexander Kater

(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 May, One thousand nine hundred and 05.

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,	Christopher Ellis.
2. Sex and Age,	Male 25 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Coachman.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Langholm.
7. Place where Found and Examined,	Mid-Lochanwoods, Ruthwell.
8. Length of time Insane,	abt 3 days.
9. Whether First Attack,	not known.
10. Age (if known) on First Attack,	" "
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	three days.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	—
16. Whether Dangerous to others,	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,	Sent to Colony. By W. & Malcolm Esq. Burnfoot, Langholm.
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 4th day of May, One thousand nine hundred and Five.

(To be signed by the party applying) Alexander Kater

T. & A. C.—Sept. 1903. P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Scott,
being a (1) Bachelor of Medicine Master in Surgery of Aberdeen Univer
and being in actual practice as a (2) General Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Mid
Locharwood Labour Colony, Ruthwell, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Christopher Ellis, residing at
Labour Colony Mid Locharwoods,
and that
the said Christopher Ellis, is a (5) person of
unsound 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) highly excited manner
constantly talking about digging out pikes seem digging
all over the place in search of them. but all night.
threatens to destroy anyone standing in his way,
talks incoherently.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Todd. Mid Locharwoods, says he has stopped work
came early in morning to say place was in fire disturbed
the neighbours, was out all night digging out pikes & came home wet
Mr Yates. Superintendent says he refuses to go to bed changes
with help of his parents & has to be watched all night

Name and Medical Designation, William Scott MB CM

Place of Abode, Ruthwell R.S.O.

DATED this fourth day of May, One thousand
nine hundred and five.

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

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

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

(4) *Insert 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, Robert Honey Watt,
being a (1) Bachelor of Medicine & Surgery of Universit
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) Crichton Ro
Institution, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Christopher Ellis, of Labour
Colony Mid Locharwoods,
and that
the said Christopher Ellis, is a (5) person of
unsound 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)
Constantly talks of digging out pikes
Says he goes out at night in search of them.
He has an excited appearance & his speech
is incoherent & rambling.

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

Name and Medical Designation, Robert Honey Watt M.B.

Place of Abode, Dumfries & Galloway Infirmary

DATED this fourth day of May, One thousand
nine hundred and five.

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

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

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

(4) *Insert 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 William Scott,
being (1) Bachelor of Medicine & Master of Surgery,
hereby certify, on soul and conscience, that I have this day, at (2) Mid Lochanwood, Rutherglen,
in the County of Dumfries, seen and personally examined
Christopher Ellis, 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 Asylum Dumfries.

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.

William Scott

DATED this Fourth day of May, 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 ~~of the~~ Crichton Asylum ~~Asylum~~ to receive therein Christopher Ellis,
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Alex. Kalis, Mid Lochanwood, Rutherglen

Date 4th ~~April~~ 1905.

May.

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

I, George Lawson, Esquire, Advocate, Sheriff-Substitute
of the (1) ~~of~~ Dumfries and Galloway ~~of~~ at Dumfries,
having had produced to me, with a Petition at the instance of (2) Alexander Kalis, Mid Lochanwood, Rutherglen,
Certificates under the hands of William Scott,
and Robert Honey 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) Christopher Ellis, Labour Colony, Mid Lochanwood, Rutherglen, and that the said
Christopher Ellis, 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 Christopher Ellis, 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 Christopher Ellis, 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 Fifth day of May, One thousand nine hundred and five years.

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

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

[Signature] Geo. Lawson

No. 9386.

Christopher Ellis.

Adm: 4 May 1905.

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 ~~Dumfriesshire~~, Peebles, and his Substitutes,— at Dumfries:

The Petition of ~~Grace Blair or Campbell~~ James Robertson, Inspector of Poor, Lerwicks.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Monteith, ~~Aunt~~ 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 Janet Monteith, 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 Robertson

(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 May, — 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,	Janet Monteith.
2. Sex and Age,	Female. 74.
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,	lived all her day at Bowhouse Kirkcudbright
7. Place where Found and Examined,	Bowhouse.
8. Length of time Insane,	—
9. Whether first Attack,	no
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment (5)	In Dumfries Asylum for 3 months in the year 1855.
12. Duration of existing Attack,	
13. Supposed Cause,	
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,	Kirkcudbright 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. Campbell (niece) 39 Horncliffe St: Glasgow.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has previously been 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 Fourth — day of May, — One thousand nine hundred and five.

(To be signed by the Party applying) James Robertson

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 Hoyle Clarke, ——— being a (1) Bachelor of Medicine & Master in Surgery of Liverpool, 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 St Dumfries, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) Janet Monteith, Spinster. pauper Bowhouses. Terregles Kirkcudbright ——— and that the said Janet Monteith, ——— is a (5) person of unsound 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 depressed Talks continually about her soul being damned. appearance and behaviour are those of an insane person. –

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Bell. 39 Florence Street. Glasgow. S. S. tells me that staying with her, she recently attempted to commit suicide.

Name and Medical Designation, Fred. Hoyle Clarke M.B.

Place of Abode, Charlotte Street Dumfries

DATED this fourth day of May One thousand nine hundred and five 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 Rutherford, 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) Crichton Royal Institution. Dumfries, ——— in the County of Dumfries ——— separately from any other Medical Practitioner, visited and personally examined (4) Janet Monteith. Spinster: from. Bowhouse Terregles. a pauper; ——— and that the said Janet Monteith, ——— is a (5) person of unsound 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) Low murmuring incoherent talk – senile Childishness.

(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 Rutherford M.D.

Place of Abode, Crichton Royal Dumfries

DATED this fourth day of May, 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, Fred. Hugh Clarke, being (1) a M.B. & C.M. Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) 1 Charlotte St. Dumfries, in the County of Dumfries, , seen and personally examined Janet Monteith Terregles Bowhouses 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.

Fred. Hugh Clarke M.B.C.M.

DATED this fourth day of May One thousand nine hundred and five 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 Monteith 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 Robertson

Date Terregles Village fourth May 1905

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) James Robertson, Inspector of Poor, Terregles, Certificates under the hands of Frederick Hugh Clarke and James Rutherford 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 Monteith, Bowhouses, Terregles (a pauper), and that the said Janet Monteith, 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 Monteith as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize (6) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Monteith, 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.
(6) His, or her.

DATED [at Dumfries,] this Fifth day of May One thousand nine hundred and five years. Two words deleted

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

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

[Signature] Geo. Lampion

No. 9384.

Janet Monteith.

(Terregles)

Adm: 4 May 1905.

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. Substitute, and his Substitutes—at Dumfries.

The Petition of Andrew Beattie Douglashall, Ecclefechan,

—humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Marion Thomson or Beattie 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 Marion Thomson or Beattie — 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) Andrew Beattie

(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 May — 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,	Marion Thomson or Beattie
2. Sex and Age,	Female. 31 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	United Free Church Douglashall. Ecclefechan
6. Previous Place of Abode,	
7. Place where Found and Examined,	
8. Length of time Insane,	2 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)	Never
12. Duration of Existing Attack,	A fortnight
13. Supposed Cause,	Worry & ill health
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,	Andrew Beattie Douglashall Ecclefechan 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 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 6th — day of May — One thousand nine hundred and five

(To be signed by the party applying) Andrew Beattie

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 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) Gilmerton
Middlebie, in the County of
Dumfries — separately from any other Medical Practitioner,
visited and personally examined (4) Marion Thomson or
Beattie, and that
the said Marion Thomson or 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) She is nervous & depressed, has delusions that she is not her husbands wife, and that she should have been killed when a little girl is always trying to put end to herself & is otherwise ill

2. Other facts (if any) indicating Insanity communicated to me by others: (7) from her Mother, Mrs Thomson informs me that she has always to watch her lest she should do herself injury

Name and Medical Designation, George Irving M.

Place of Abode, Lockerbie

DATED this fourth — day of May — 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.

(6) *State the facts.*

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

I, the undersigned, John Rutherford Gilmour
being a (1) Fellow of the 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) the
Crichton Royal Institution, Dumfries the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Marion Thomson or
Beattie, from Douglashall Eccleschan and that
the said Marion Thomson or 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) She is depressed and confused. Her memory is poor and she gives varying answers to the same question. She has the delusions that she is watched by day and that watchers are on the stairs by night. She says that everyone appears a dozen times

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

Name and Medical Designation, J. R. Gilmour M.R.C.P.

Place of Abode, Scaleor House, Burley in Wharfe

DATED this sixth — day of May — 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, George Irving
being (1) Doctor of Medicine & Mortuin Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Gilmerton
in the County of Dumfries, seen and personally examined
Marion Thomson or Beattie, 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.

George Irving M.D.

DATED this fourth day of May 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 Asylum to receive therein Marion Thomson or Beattie to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Andrew Beattie. Douglashall Ecclefechan

Date May 5th 1905

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 ~~of~~ at Dumfries having had produced to me, with a Petition at the instance of (3) Andrew Beattie, Douglashall, Ecclefechan Certificates under the hands of George Irving and John Rutherford Gilmour 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 Thomson or Beattie, Douglashall, Ecclefechan (Between us) and that the said Marion Thomson or Beattie 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 Thomson or Beattie 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 Marion Thomson or Beattie 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 May One thousand nine hundred and five. Two words deleted

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

[Signature] Geo. Lampson

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

No. 9388.

Marion Thomson or Beattie

Adm: 6th May 1905.

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) bounty of~~ Dumfries & Galloway *and his Substitutes,*—at Dumfries:

The Petition of Janet Watret Kirkhouse, Kirkgunzeon;

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Archibald Watret,

(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 Archibald Watret, to the Southern Counties Asylum, and to sanction his admission into the said Asylum

(*To be signed by the Party applying*) Janet Watret

(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 May, One thousand eight 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,	Archibald Watret.
2. Sex and Age,	Male. 69.
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,	Kirkhouse, Kirkgunzeon.
7. Place where Found and Examined,	" "
8. Length of time Insane,	2 months at least.
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	64.
11. When and where previously under Examination and Treatment (5)	2 years ago Southern Counties Asylum
12. Duration of Existing Attack,	Several months;
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Keeping to room himself.
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Kirkgunzeon~~
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 Watret, Kirkhouse, Kirkgunzeon.
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 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 May, One thousand nine hundred and five.

(*To be signed by the party applying*) Janet Watret

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, Alford William Anderson ——— being a (1) Master of Surgery & Bachelor of the Medicine 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) Kirkhouse, Kirkgunzeon, ——— in the County of Kirkcudbright, ——— separately from any other Medical Practitioner, visited and personally examined (4) Archibald Watret, Kirkhouse Kirkgunzeon, ——— and that the said Archibald Watret ——— is a (5) person of unsound mind ——— and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(4) *State the facts.*

1. Facts indicating Insanity observed by myself: (4)

Talks in a rambling, incoherent manner, Says he has got a gift from God, and behaves himself in an extravagant violent manner. —

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

2. Other facts (if any) indicating Insanity communicated to me by others: (6)

Janet Watret, his daughter, informs me that her father has repeated threatened violence to herself & others, that he wanders about for days & nights & annoys all in the neighbourhood, that they cannot manage him at home.

Name and Medical Designation, Alford William Anderson M.B. & C.M. Ed

Place of Abode, Balbeattie

DATED this Fourteenth day of May, ——— One thousand eight 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 Honey Watt, ——— being a (1) Bachelor of Medicine & Surgery of University 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) Archibald Watret, Kirkhouse Kirkgunzeon ——— and that the said Archibald Watret, ——— is a (5) person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(4) *State the facts.*

1. Facts indicating Insanity observed by myself: (4)

Talks in an incoherent manner, is in a state of excitement. His conversation is composed of religious ideas. He cannot sit still.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (6)

Name and Medical Designation, Robert Honey Watt M.B.C.

Place of Abode Dumfries & Galloway Royal Infirmary

DATED this ~~Twenty~~ Fifteenth day of May ——— One thousand ~~eight~~ 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, Alfred William Anderson
being (1) Master of Surgery & Bachelor of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) Kirkhouse
in the County of Kirkcudbright, seen and personally examined
Archibald Watret, 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.

Alfred William Anderson
Alf Anderson

DATED this fourteenth day of May — 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 Dumfries, Asylum to receive therein Archibald Watret, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Janet Grace Stirk Watret
Kirkpatrick

Date Fourteenth May 1905
14 May 1905.

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) Janet Watret, Kirkhouse, Kirkpatrick, Certificates under the hands of Alfred William Anderson and Robert Howey 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 (6) Archibald Watret Kirkhouse Kirkpatrick, and that the said Archibald Watret, 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 Archibald Watret as a Patient into the (8) Public Asylum of Southern Counties, 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 Archibald Watret, 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 Sixteenth day of May — One thousand ~~eight~~ hundred and five years. Two words deleted

To the Superintendent of the (8) Public Asylum of Southern Counties at Dumfries.

[Signature] Geo. Campion

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

No. 9389.

Archibald Watson.

Adm: 14 May 1905.

14,482.

[FORM B]

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 ~~##~~ Miles Mc Innes
being desirous to transfer Thomas J. Purcell
at present a Patient in Riccartsbar Asylum Paisley and (1) a Pauper Lunatic of the Parish of which I am Inspector of Poor 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,	Thomas J. Purcell
2. Sex and Age,	Male - 44
3. Married, Single, or Widowed,	Married
4. Condition of Life, and Previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Roman
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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,	Mary A. Shortridge or Purcell, Wife, residing at 62 Parliamentary Road, Glasgow. Not so far as 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*) Miles Mc Innes

(2) Insp of Poor

(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 Five 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.

T. & A. C.—May 1898.

MEDICAL CERTIFICATE.

I, the undersigned William George Macdonald hereby certify that I have this day at (1) Riccartsbar Asylum, Paisley, personally examined Thomas Johnston Purcell who has been a Patient in said Asylum since (2) 3rd April, 1905 and I 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 certify, with respect to the Mental State of the Patient, that (4) he talks in rambling fashion; laughs immoderately without apparent reason; has delusions of grandiose type eg says he has a great amount of money in Clydesdale Bank, that ~~that~~ Colton Hill (Edin) was covered with gold sovereigns, that he bought thirty horses, that he will give his son £500, and with respect to the Bodily State of the Patient, that (5) he is in good physical condition. The speech is becoming affected,

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Crichton Royal (Dumfries) 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.

(Name) W. G. Macdonald,

(Medical Qualification) L.R.C.P.&S. Edin.

(Date) 2nd May, 1905.

No. 9390.
Thomas J. Purcell.
(Duplicate)
Adm: 16 May 1905.

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 Thomas Johnston Purcell (alias Sidney Albert Purcell) from Paisley Parochial Asylum, Riccartsbar 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 Heuce Secretary. ~~Commissioner.~~

DATED at Edinburgh, this 8th day of May. One thousand ~~eight~~ nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

4th April 1905.

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 *Vic.*, *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 Archibald Campbell 62 Albert Drive, Pollockshields, Glasgow humbly sheweth that it appears from the subjoined statement and accompanying Medical Certificates that Andrew Campbell, ———

(3) State degree of relation-ship 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 authorise the transmission of the said Andrew Campbell to the Crichton Institution and to sanction his admission into the said Asylum.

(To be signed by the party applying) Archd Campbell

(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 May 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, ...	Andrew Campbell
2. Sex and Age, ...	Male; 20 years.
3. Married, Single, or Widowed, ...	Single.
4. Condition of Life, and previous Occupation (if any), ...	Apprentice Joiner.
5. Religious persuasion, so far as known, ...	Protestant
6. Previous Place of Abode, ...	62 Albert Drive, Pollockshields.
7. Place where found and Examined, ...	62 Albert Drive Pollockshields
8. Length of Time Insane, ...	Several months.
9. Whether First Attack, ...	First
10. Age (if known) on First Attack, ...	20 years
11. When and where previously under examination and Treatment, (5)	—
12. Duration of Existing Attack, ...	Several months
13. Supposed Cause, ...	Adolescence
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 his Family known to be or to have been Insane, ...	Archibald Campbell — Father — 62 Albert Drive Pollockshields, 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 date, 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 18th — day of May — One thousand nine hundred and five.

(To be signed by the party applying) Archd Campbell

S. & E.—7000

MEDICAL CERTIFICATE, No. 1.

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) 62 Albert Drive, Pollockshields, Glasgow, in the County of Renfrew ~~Lanark~~ separately from any other Medical Practitioner, visited and personally examined (4) Andrew Campbell, residing there, Apprentice Joiner, and that the said Andrew 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 is restless, hurried & excitable in manner and appearance and he is subject to morbid impulses & irrational ideas such as, that he desires to kill some body or commit suicide. He says he has attempted to commit suicide.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His father, states that he has been in a bad state of mind for several years, and has been unable to apply himself continuously to business

Name and Medical Designation, Carswell L.R.C.P.E. &c

Place of Abode, 5 Royal Crescent Glasgow.

DATED this 17th day of May One thousand nine hundred and five.

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

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

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

(4) *Insert 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. 2.

I, the undersigned, Neil Carmichael
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) 62 Albert Drive, Pollockshields, Glasgow in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) Andrew Campbell residing there, apprentice joiner, and that the said Andrew 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 is excited, confused in his thoughts, expresses a desire to kill some one, threatens to commit suicide.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He is at times very violent and threatens ~~d~~ as for those about him, as his mother states to me

Name and Medical Designation. Neil Carmichael M.D. &c

Place of Abode, 177 Rutherglen Road, Pollockshields Glasgow

DATED this 17th day of May One thousand nine hundred and five.

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

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

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

(4) *Insert 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 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, John Barwell being (1) a Licentiate of the Royal College of Physicians Edinr. hereby certify, on soul and conscience, that I have this day, at (2) 62 Albert Drive, Pollokshields, in the County of Renfrew, seen and personally examined Andrew 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.

John Barwell L.R.C.P.E. 67

DATED this 17th day of May 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 Asylum, Dumfries to receive therein Andrew Campbell to whom the foregoing Certificate of Emergency refers.

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

Signature and Address, Andr Campbell - 62 Albert Drive Pollokshields

Date, 19th May 1905

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

I, George Sampson, Advocate, Sheriff Substitute (1) of the Lothian Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (2) Archibald Campbell, 62 Albert Drive, Pollokshields, Glasgow. Certificates under the hands of John Barwell, and Neil Carmichael, 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) Andrew Campbell, 62 Albert Drive, Pollokshields, Glasgow, Petitioners son and that the said Andrew Campbell 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 Andrew Campbell as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorise you to Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Andrew Campbell which accompanied the said Petition.

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

DATED [at Dumfries] this Twentieth day of May, one thousand nine hundred and five years.

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

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

(Signature) Geo. Sampson

No. 9391.

Andrew Campbell.

Adm: 19 May 1905.

Enc

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 Bell, Summerville, Waterford;

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Louisa Bell, ~~daughter~~ ———

(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 Louisa Bell ——— to the Crichton Royal Institution, ~~Dumfries~~ and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Henry Bell

(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 May, ——— 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,	Louisa Bell.
2. Sex and Age,	Female — 29 years & 9 mos.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Trained Nurse, & Dispenser of Medicines
5. Religious Persuasion, so far as known,	Society of Friends.
6. Previous Place of Abode,	Summerville, Waterford, Ireland.
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Subject to delusions about 2 years.
9. Whether First Attack,	no regular attack - delusions seemed to come gradually.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5),	not before under treatment.
12. Duration of Existing Attack,	as number 9.
13. Supposed Cause,	because she did not control her thoughts
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,	Father — Henry Bell Summerville Waterford — None of family similarly affected nor have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	———

(5) If patient has been previously in an Establishment, state last, or date of latest admission or approximation thereto. If never previously under examination or treatment, use fact.

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

DATED this Twenty third day of May, ——— One thousand nine hundred and five. —

(To be signed by the party applying) Henry Bell

T. & 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.*

I, the undersigned, James Alex. Orrock M.D. ——
being a (1) M.D. Univ. of Aberdeen, ——
and being in actual practice as a (2) Physician, ——
do hereby certify, on soul and conscience, that I have this day, at (3) Commercial Rd, ——
Walthamstow, —— in the County of Essex, separately from any other Medical Practitioner, visited and personally examined (4) Louisa Bell, 9 Somerville Rd, Walthamstow, —— and that the said Louisa Bell —— 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)
States that a man named "Gillick" comes in at night and she cannot rest for him. Says that my name is Gillick.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sent for by husband who says she is at times excited, sleepless and imagines people are against her.

Name and Medical Designation, James Alex. Orrock M.D.

Place of Abode, Grand Lodge Walthamstow

DATED this 22nd —— day of May, —— 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.*

(6) *State the facts.*

I, the undersigned, Annie May Yates ——
being a (1) M.B. Ch.B. 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) Belmont Hall, Glasgow, —— in the County of Lanarkshire, —— separately from any other Medical Practitioner, visited and personally examined (4) Louisa Bell, 9 Somerville Rd, Walthamstow, —— and that the said Louisa Bell, —— is a (5) Person of unsound 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 delusions about her food thinks there is poison in it; and refuses it.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
States that some person is breaking her about and interfering with her religious beliefs.

Name and Medical Designation, Annie May Yates M.B.

Place of Abode, Glasgow.

DATED this twenty fourth day of May, —— 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, James Alfred Ouchterlony,
being (1) a Physician,
hereby certify, on soul and conscience, that I have this day, at (2) Dunscore,
in the County of Dumfries, seen and personally examined
Louisa Bell, 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 Alfred Ouchterlony

DATED this thirty third day of May, 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 Royal Crichton Institution
Asylum to receive therein Louisa Bell
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Henry Bell Summerville Waterford,

Date 24th May, 1905.

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

I, George Lawson, 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
Bell, Summerville, Waterford, and Certificates under the hands of James Alfred Ouchterlony, M.B. and Annie May Yates, 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) Louisa Bell, Summerville, Waterford, (Petitioner's daughter) and that the said Louisa Bell, Summerville is (5) an 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 Louisa Bell, Summerville 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 Louisa Bell, Summerville — 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 May, One thousand nine hundred and five. Three words deleted.

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

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

[*Signature*] Geo: Lawson

No. 9392.

Louisa Bell.

Adm: 24 May 1905.

14,845. [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.

, the undersigned (1) James R. Motion.
ing desirous to transfer Isabella Dawson
present a Patient in Gartloch Asylum
. Pauper,—
and (2) from the said Asylum to the
Crichton Royal Asylum, 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."

g to submit the subjoined Statement of Particulars regarding the said patient, and a edical Certificate with respect to the mental and bodily condition of the said patient:—

STATEMENT OF PARTICULARS.

. Christian Name and Surname of Patient at length,	Isabella Dawson
. Sex and Age,	Female. 65 years
. Married, Single, or Widowed,	Single.
. Condition of Life, and Previous Occupation (if any),	Domestic.
Religious Persuasion, so far as known,	Protestant
Parish to which the Lunatic (if a Pauper) is Chargeable,	Parish of Glasgow.
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. Revd. J. Anderson Dawson. The Manse. York Road. Newton-Stewart. No

I certify that, to the best of my knowledge, the above particulars are correctly stated, nd 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*) Jas: R. Motion
(3) Inspector of Poor of the Parish of Glasgow.

(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 11th day of May One thousand nine hundred and Five years.

N.B.—The foregoing particulars, and those contained in the Medical Certificate which fo ows, 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.—June 1905.

MEDICAL CERTIFICATE.

(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.

I, the undersigned William A Parker hereby certify that I have this day at (1) Gartloch Asylum personally examined Isabella Dawson who has been a Patient in said Asylum since (2) April · 22 · 1905 and I certify that 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 the Patient, that (4) She considerably demented She is depressed emotional ther memory is much impaired and with respect to the Bodily State of the Patient, that (5) it is only fair

(6) Insert "the following are," or "there are no," as the case may be.

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (7) Crichton Royal Asylum Dumfries ~~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 :—

(Signature) W A Parker.

(Medical Qualification) MB Cm. Glasg.

(Date) May · 9. 1905

No. 9893
Isabella Dawson.
Adm: 24 April 1905.

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 Isabella Dawson from Glasgow District Asylum Gartloch. to Crichton Royal Asylum 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 Spence
Secretary.

DATED at Edinburgh, this 12th day of May. One thousand nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

22nd April 1905.

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 Margaret Hood, Lodholme Cottage, Paisley,

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Hood,

(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 Helen Hood, to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Margaret Hood

(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 May — One thousand nine hundred and five 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 Hood.
2. Sex and Age,	Female. 64.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	No occupation.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Millport.
7. Place where Found and Examined,	11 Garnet Terrace, Mount Florida, Glasgow.
8. Length of time Insane,	One year.
9. Whether First Attack,	No. Second attack.
10. Age (if known) on First Attack,	54.
11. When and where previously under Examination and Treatment (5)	Lochgilphead Asylum.
12. Duration of Existing Attack,	One year.
13. Supposed Cause,	Ill health.
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,	Margaret Hood. Daughter. Above address. No insanity in 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 of latest and approximate date. If previously under medical or treatment, state when last.

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

DATED this 24th day of May — One thousand nine hundred and five years.

(To be signed by the party applying) Margaret Hood.

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) 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) The Crich
Royal Institution, Dumfries, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Mrs Helen Hood, Wid
Millport, Buteshire;
and that
the said Mrs Helen Hood, is a (5) person o
unsound 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 depress
Worries about trifles, and knows no peace
of mind night or day. She is highly ner
ved is occupied by her own short-com

(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, Fred: Hugh Clarke, M.
Place of Abode, Charlotte Street, Dumf
DATED this twenty seventh day of May One thousand
nine hundred and five 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, Robt- Honey Watt,
being a (1) Bachelor of Medicine & Surgery of
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) Crichton
Institution, Dumfries, in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Mrs Helen Hood, Widow
Millport, Buteshire, and that
the said Mrs Helen Hood, is a (5) person of
unsound 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
of marked depression. She is unable think of anyth
but herself. She worries incessantly over not
She is highly emotional.

(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 H. Watt M
Place of Abode, Dumfries & Galloway Royal
DATED this twenty-sixth day of May 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, being (1) ~~James Jenkins Robb~~ Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) Mount Hinde Place in the County of Lanark, seen and personally examined Helen 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) 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.

J Jenkins Robb M.D.

DATED this 23rd day of May, 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 Asylum to receive therein Helen Hood, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Margaret Ford Lodholm Cottage Paisley

Date 24th May 1905.

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 and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) Margaret Hood, Lodholm Cottage, Paisley, Certificates under the hands of Frederick Hugh Clarke, and Robert Honey 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 (5) Mrs Helen Hood, Widow, Millport, Buteshire, (Petr's mother), and that the said Mrs Helen Hood, 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 Mrs Helen Hood 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 Mrs Helen Hood, 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.
(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-seventh day of May, One thousand nine hundred and five years.

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

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

[*Signature*] Geo. Campion

No. 9394.

Helen Hood.

Adm: 24 May 1905.

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 (2) Galloway — *and his Substitutes at Dumfries.*

The Petition of John Lamie, Inspector of Poor for the Parish of Innan!

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Donaghue or Callins, 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 Donaghue or Callins — 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 Lamie

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

DATED this 26th (4) day of May, — 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 Donaghue or Callins.
2. Sex and Age,	Sex Female. Age. 24 years.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	Formerly Domestic Servant.
5. Religious Persuasion, so far as known,	Roman Catholic.
6. Previous Place of Abode,	10 Port Street Innan.
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	about one week.
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 (5)	—
12. Duration of Existing Attack,	about one week.
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Doubtful.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Innan 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,	Michael Callins. Insurance Agent. 10 Port Street. Innan. Husband. no member of family known to have been insane so far as known.
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 approximately thereto. If previously under examination or treatment elsewhere, state where.

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

DATED this 26th day of May, — One thousand nine hundred and five.

(To be signed by the party applying) John Lamie

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Elder,
being a (1) M.D. Ch. B Glasgow University,
(Bachelor Medicum & Surgery)
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) 10 Port-Street
Ennan,
Dumfries,
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Mary Donoghue or Collins of
10 Port Street Annan a pauper,
and that
the said Mary Donoghue or Collins,
is a (5) person of
unsound 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)
maniacal appearance, restless, incoherent, has loss of memory
state bed is moving, that she is in a boat, that she
is surrounded by fire, & that "extra feeding is coming
on being in bed. She shouts for the cows and for water
She mistook me for our medical adviser.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Collins confined 9 days ago and husband affirms she
becoming noisy, has attempted to leave the house, claims her
putting poison in her food & sees people around her bed

Name and Medical Designation, Wm Elder M.B.Ch.B
Place of Abode, 1 English St Annan

DATED this twenty sixth day of May One thousand
nine hundred and four.

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

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

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

(4) *Insert 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, William Murdoch,
being a (1) Doctor of Medicine of 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) 10 Port-
Street Annan,
Dumfries,
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Mary Donoghue or Collins,
of 10 Port-Street Annan, a pauper,
and that
the said Mary Donoghue or Collins,
is a (5) person of
unsound 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 maniacal
is constantly on the move has to be restrained or would
rush outside in her bed clothes condition talks con-
stantly in a rambling & incoherent manner, & often
shouts loudly, without reason. Has an idea that flames
fire all round her bed.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her husband states that she has been restless sleepless
for several nights & has been gradually getting more restless
excitable & incoherent for the past two days. She has not
been quite well since her accouchement on 17th inst.

Name and Medical Designation, Wm Murdoch M.D.
Place of Abode, Fairview Park Annan.

DATED this twenty-fifth day of May One thousand
nine hundred and five.

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

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

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

(4) *Insert 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, William Elder,
being (1) Public practitioner and Surgeon,
hereby certify, on soul and conscience, that I have this day, at (2) 10 Port St Anne,
in the County of Dumfries, seen and personally examined
Mary Donaghue or Collins, 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.

Wm Elder MD

DATED this twenty sixth day of May, — 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 Mary Donaghue or Collins 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 26 May 1905.

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

I, George Campion Advocate, Sheriff Substitute (4) of the Stewartry of Dumfries and Galloway, at Dumfries, having had produced to me, with a petition at the instance of (5) John Laurie, Inspector of Poor, Annan, Certificates under the hands of William Elder, 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 (6) Mary Donaghue or Collins, Port Street, Annan, (Pauper) and that the said Mary Donaghue or Collins 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 Mary Donaghue or Collins 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 Mary Donaghue or Collins, 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 May, One thousand nine hundred and five years.

To the Superintendent of the (8) Public Asylum of Crichton Royal Institution, Dumfries.

[Signature] Geo. Campion

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

No. 9895.

Mary Donaghue or Collins.

(Annan)

Adm: 26 May 1905.

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 Andrew Anderson, 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 Andrew Anderson, 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 ninth (*) day of May, One thousand nine hundred and Five 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 Anderson.
2. Sex and age,	male. 62.
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous occupation (if any),	Baker.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous place of abode,	157 St Michael St.
7. Place where found and examined,	157 St Michael St.
8. Length of time Insane,	several years.
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,	Nowhere.
12. Duration of Existing Attack,	Not known.
13. Supposed Cause,	not known.
14. Whether Subject to Epilepsy,	No. Yes
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,	29th May, 1905.
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 Anderson, 157 St Michael Street, Dumfries. 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 Twenty ninth day of May, One thousand nine hundred and Five years.

(To be signed by the party applying) Miles Mc Innes

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, J. S Gordon Gray, being a (1) Bachelor of medicine and Surgery of the Universit and being in actual practice as a (2) General Practitioner, do hereby certify, on Soul and Conscience, that I have this day, at (3) 157 St Michael Dumfries, in the County of Du separately from any other Medical practitioner, visited and personally examined (4) Andrew Anderson, Pauper, and that the said Andrew Anderson, is a (5) person of unsound m 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. Tells me can't sleep at nights. Repeats the same thing over and again.

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

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

His daughter, Mary Anderson on Kirkpatrick te me he gets violent at nights. Does not on the street well only his Shirt on. And often cries "murder".

Name of Medical Designation, J. S Gordon Gray

Place of Abode, 20 Castle Street

DATED this twenty - ninth day of May, One thousand nine hundred and five 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, George R. Livingston being a (1) Doctor of Medicine of 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) 157 St Michael Street, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Andrew Anderson, Pauper, and that the said Andrew 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)

His insane manner and appearance His rambling conversation about people he meets on the Street talking about him.

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

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

His Son James Anderson 157 St Michael Street, Dumfries, tells me that he get quite outrageous at times. That he copes him with stories that people have picked his pockets.

Name of Medical Designation, George R. Livingston M.D

Place of Abode, 6 Castle Street Dumfr

DATED this twenty - ninth day of May, One thousand nine hundred and five years.

CERTIFICATE OF EMERGENCY.

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

I, the undersigned, J. S. Gordon Gray,
being (1) Bachelor of Medicine and Surgery of the University of Aberdeen
hereby certify, on Soul and Conscience, that I have this day, at (2) 157 St Michael Street Dumfries
in the County of Dumfries, seen and personally examined
Andrew Anderson, 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.

(1) State Medical Qualification.
(2) State place of Examination.

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

J. S. Gordon Gray

DATED this twenty-ninth day of May, One thousand nine hundred and five 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 Anderson
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 Emms 28 Queen St Dumfries.

Date, 29th May 1905.

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

I, George Lampion, 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 McEmms Inspector of Poor, Dumfries,
Certificates under the hands of J. S. Gordon Gray,
and George R. Livingston, being two Medical Persons duly qualified in terms of an Act, entitled "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 Anderson, 157 St Michael Street, Dumfries,
and that the said Andrew Anderson, 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 Andrew Anderson, as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise this Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said Andrew Anderson, which accompanied the said Petition.

(Pauper)

(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 Thirtieth day of May One thousand nine hundred and five years. Three printed words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo. Lampion

No. 9396.

Name, Andrew Anderson.
(Dumfries)

Date of Admission, 29th May 1905.

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 Dumfries & Galloway and his Substitutes, at Dumfries.

The Petition of James Morrison, Inspector of Poor of the Parish of Dryfesdale, Dumfriesshire,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Green or Beattie,

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

your Petitioner's (*) 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 Elizabeth Green or Beattie to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) James Morrison

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

DATED this 29th (*) day of May One thousand nine hundred and five 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 Green or Beattie.
2. Sex and Age,	Female. 43 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Farm Servant's wife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Home Farm, Balgray, Applegarth by Lockerbie.
7. Place where Found and Examined,	3 Jury Place, Marius St, Lockerbie.
8. Length of time Insane,	Mentally weak for over 4 months.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	This is the first attack,
11. When and where previously under Examination and Treatment (†)	
12. Duration of Existing Attack,	about 7 months.
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,	Dryfesdale
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 Husband John Beattie has today removed to Annan. His address there not yet known to petitioner.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(†) If patient has previously in an Asylum, state name and date of latest admission; if approximate, state the same. 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 29th day of May, One thousand nine hundred and five years.

(*To be signed by the party applying*) James Morrison

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, 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) 3 Ivy Place, Main Street, Lockerbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Elizabeth Green or Beattie, 3 Ivy Place, Main St. Lockerbie, and that the said Mrs. Elizabeth Green or 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) She is excited, & always in motion, the fears of the Police as she thinks she has committed some theft or other crime, & her whole conduct & behaviour are irrational.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) John Mc Callum, her brother in law informs me that she had put all the children out of the house on account of her delusions

Name and Medical Designation, George Irving M.

Place of Abode, Lockerbie

DATED this twenty ninth day of May — 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.

(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
do hereby certify, on soul and conscience, that I have this day, at (3) 3, Ivy Place, Main Street, Lockerbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Elizabeth Green or Beattie, 3, Ivy Place, Main Street, Lockerbie, Pauper and that the said Mrs Elizabeth Green or 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) Says that she has robbed Belgrey House and murdered the servants up to the police (Delusion). Says that the household furniture has to be sold for debt (delusion). Very excitable restless, Sleepless & incoherent in Speech.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband (John Beattie) informs me that she put the children out of the house & locked the door. She declared that he was making a coffin for her & tried to persuade her from the house.

Name and Medical Designation, J. Bell M.B. C.M.

Place of Abode, Lockerbie

DATED this twenty ninth day of May — 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, George Irving
being (1) Doctor of Medicine & Modern Surgery
hereby certify, on soul and conscience, that I have this day, at (2) 3 Ivy Place Dumfries
in the County of Dumfries, seen and personally examined Mrs Elizabeth Green or Beattie, 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.

George Irving M.D.

DATED this twenty fifth day of May 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 Asylum to receive therein Elizabeth Green or Beattie, 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 Miller Parish Council Office Lockerbie.

Date 29th May 1905.

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

I, George Sampson, Advocate, Sheriff Substitute of (4) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) James Morrison, Inspector of Poor, Dryfesdale, Certificates under the hands of George Irving, 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 Mrs Elizabeth Green or Beattie, 3 Ivy Place, Main Street, Lockerbie, (Dumfries) and that the said Mrs Elizabeth Green or Beattie is a (6) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Mrs Elizabeth Green or Beattie 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 Mrs Elizabeth Green or Beattie 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.
(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 May, One thousand nine hundred and five 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. Sampson

No. 9397.

Elizabeth Green or Beattie

(Dryfesdale)

Adm: 29th May 1905.

Crichton Royal Institution: Dumfries:
~~Glasgow Royal Asylum, Gartnabel.~~

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 William Bell,

residing at Braefoot, Lochwinnoch;

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Craig Bell,

your Petitioner's (3) sister, residing at 31 Victoria Place, Baramill St, Govan,

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 Craig Bell, to the Crichton Royal Institution Dumfries, ~~GLASGOW ROYAL ASYLUM at GARTNABEL~~, 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) William Bell

(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 May, — 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,	Annie Craig Bell.
2. Sex and Age,	female - 34 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,	Protestant.
6. Previous Place of Abode,	Kilmalcolm.
7. Place where Found and Examined,	31 Victoria Place. Baramill St.
8. Length of time Insane,	one month. Govan.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	never examined.
12. Duration of Existing Attack,	one month.
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. 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 Bell, Braefoot, Lochwinnoch. no — Brother.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Establishment, state its 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 Thirtieth day of May, — One thousand nine hundred and five.

(To be signed by the party applying) William Bell

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, ~~Annie Craig~~ Bell Hugh John MacMillan being a (1) Bachelor of Medicine and Master of Surgery of Edenburgh 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) 31 Victoria Place, Barassie Street, Troon, — in the County of Ayr, — separately from any other Medical Practitioner, visited and personally examined (4) Annie Craig Bell, at 31 Victoria Place, Barassie Street, Troon, — and that the said Annie Craig Bell, — is a (5) person of unsound 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 states that she is lost. Repeats the words Lost Lost Lost. That she is beyond forgiveness. She is restless at times violent in her conduct. Twould rush from the room with an insane desire to destroy anything or everything she could lay her hands on — unless prevented.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her niece ~~states~~ Annie Completon states that she at times rises from her bed screaming that she is lost & rushes out as bad as she is, to the garden where she tears her hair. Her present conduct is quite opposed to her natural state.

Name and Medical Designation, Hugh J. MacMillan MB CM

Place of Abode, 11 Portland Terrace, Troon

DATED this the Twenty-ninth day of May — 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.*

(6) *State the facts.*

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

I, the undersigned, John Sloan being a (1) Bachelor of Medicine and Master of Surgery 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) 31 Victoria Place Barassie Street, Troon, — in the County of Ayr, — separately from any other Medical Practitioner, visited and personally examined (4) Annie Craig Bell, at 31 Victoria Place Barassie Street, Troon, — and that the said Annie Craig Bell, — is a (5) person of unsound 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 profound mental depression and states repeatedly that she is lost and will die soon — also that nothing can save her. She is extremely restless with a haggard wild expression, cries and screams and sometimes tears her hair; becomes so violent that she has to be restrained.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her niece Annie Completon states that frequently she is seized with violent screaming attacks and if not held would run out into the street or garden, she tears her hair & conducts herself in a totally different manner to usual.

Name and Medical Designation, John Sloan MB CM

Place of Abode, Heathfield, Victoria Drive, Troon

DATED this Twenty fourth day of May — 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 John MacKintosh, being (1) a Bachelor of Medicine & Master of Surgery Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) 31 Victoria Place, Barassie Street Troon, in the County of Ayr, Annie Craig Bell, 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;

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 J. MacKintosh
M.B. C.M.

DATED this twenty ninth day of May 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 ~~GLASGOW~~ ROYAL ~~ASYLUM~~ Institution to receive therein Annie Craig Bell, to whom the foregoing Certificate of Emergency refers.

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

Signature William Bell

Address Braefoot Lochwinnoch

Date Thirtieth May, 1905.

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

I, George Campion, Advocate, Sheriff-Substitute, of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) William Bell, Braefoot, Lochwinnoch, Certificates under the hands of Hugh John MacKintosh, and John Sloan, 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) Annie Craig Bell, 31 Victoria Place, Barassie Street, Troon, (Petrs: sister) and that the said Annie Craig Bell, 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 Annie Craig Bell as a patient in the ~~GLASGOW ROYAL ASYLUM at GARTNAVEL~~, 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 Craig Bell, 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.

DATED [at Dumfries,] this Second day of June, One thousand nine hundred and five years.

To the Superintendent of the Public Asylum of ~~Glasgow Royal Asylum at Gartnavel~~ Dumfries.

Nine printed words deleted

Geo. Campion

[Signature]

No. 9898.

Annie Craig Bell.

Adm: 30 May 1905.

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 Margaret McClure 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 Margaret McClure 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 Thirtieth (*) day of May One thousand nine hundred and Five 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 McClure
2. Sex and age,	Female 28
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous occupation (if any),	Weaver
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	Nithsdale Terrace
7. Place where found and examined,	Nithsdale Terrace
8. Length of time Insane,	several years.
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,	Nowhere
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,	Dumfries
18. Date of becoming Chargeable,	30th May 1903.
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 McClure Father Nithsdale Terrace Dumfries.
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,	Not so far as known None

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

DATED this Thirtieth day of May One thousand nine hundred and Five Years.

(To be signed by the party applying) Miles Mc Innes

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, Peter Murray Kerr being a (1) Bachelor of Medicine and Master in Surgery Member 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) Nithsdale Terrace Dumfries in the County of Dumfries separately from any other Medical practitioner, visited and personally examined (4) Margaret McClure pauper Nithsdale Terrace Dumfries and that the said Margaret McClure is a (5) person of unsound 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 facile; laughing one moment & crying the next. At certain times tears her clothes. Cannot answer any reasonable question. Is an epileptic

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

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

Name of Medical Designation, } Peter Murray Kerr M.B.C.M.

Place of Abode, 20 Castle Street Dumfries

DATED this Nithsell day of May One thousand nine hundred and five 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, Georg Robert Livingston being a (1) Doctor of medicine of Edinburgh having and being in actual practice as a (2) Physician & Surgeon do hereby certify, on Soul and Conscience, that I have this day, at (3) Nithsdale Terrace Dumfries Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Margaret McClure pauper Nithsdale Terrace Dumfries and that the said Margaret McClure is a (5) person of unsound 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 manner & appearance
Her restless excited manner
She tears at the bed clothes and at her night dress

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her father Alexander McClure, Nithsdale Terrace Dumfries tells me she becomes quite unmanageable at times.

Name of Medical Designation. } George R. Livingston M.D.

Place of Abode, 7 Castle Street Dumfries

DATED this Thirtieth day of May One thousand nine hundred and five.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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) Witherdale in the County of Dumfries, seen and personally examined Margaret McClure, 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.

(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 thirtieth day of May One thousand nine hundred and five years

Peter Murray Kerr

(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 McClure 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 St.

Date, 30 May 1905

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

I, George Lawson, 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 Robert Livingston, being two Medical Persons duly qualified in terms of an Act, entitled "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 McClure Witherdale Terrace, Dumfries (a pauper) and that the said Margaret McClure 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 Margaret McClure 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 Margaret McClure 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 thirty-first day of May One thousand nine hundred and five years. Three printed words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo. Lawson

No. 9399.

Name, Margaret McClure.
(Dumfries)

Date of Admission, 30th March 1905.

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 Anthony M. Dick, Inspector of Poor, Lochrutton, Dumfries;

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Peat or Tait, ——

(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 Margaret Peat or Tait, — to the ~~Mavisbank Asylum at Polton, near Edinburgh,~~ Crichton Royal Asylum, Dumfries, and to sanction Her admission into the said Asylum.

(To be signed by the Party applying) Anthony M. Dick

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

Dated this 2nd (4) day of June, — One thousand eight hundred and five nine

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 Peat or Tait,
2. Sex and Age,	Female - 23 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Wife of Ploughman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Carswadda Cottage, Lochrutton
7. Place where Found and Examined,	Lochrutton
8. Length of time Insane,	Two weeks.
9. Whether First Attack,	Yes!
10. Age (if known) on First Attack,	23 years.
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	Ten days
13. Supposed Cause,	Child Birth.
14. Whether subject to Epilepsy,	No!
15. Whether Suicidal,	No!
16. Whether Dangerous to others,	Yes! To the Child.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lochrutton at present
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 Tait, Carswadda Cott. Lochrutton, - Husband -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an establishment, state when, as date of latest admission or approximation thereto. If never 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 2nd day of June, nine One thousand ~~eight~~ hundred and five.

(To be signed by the party applying) Anthony M. Dick

T. & A. C.—Dec. 1898.

P p.

No. 9838

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 Robert Livingston, ——
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) Carswadda Cottage, Lochrutton ——— in the County of Kirkcudbright ——— separately from any other Medical Practitioner, visited and personally examined (4) Maggie Peat or Tait, Carswadda Cottage, Lochrutton, Kirkcudbright, —and that the said Maggie Peat or 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)
Her insane manner & appearance.
Her rambling incoherent conversation.
She imagines she is doomed to go to Hell

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her mother's sister, Mary Morgan or Peat tells me She has threatened to destroy her baby, and has attacked her husband.

Name and Medical Designation, Geo. R. Livingston M.D.

Place of Abode, 67 Castle Street Dumfries

DATED this Second day of June — One thousand ~~eight~~ 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, Archibald Chalmers, ——
being a (1) M. B., C. M. ——
and being in actual practice as a (2) medical practitioner, ——
do hereby certify, on soul and conscience, that I have this day, at (3) Carswadda Cottage, Lochrutton, ——— in the County of Kirkcudbright — separately from any other Medical Practitioner, visited and personally examined (4) Mrs. George Tait, residing there, ——— and that the said Mrs George 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) Sleepless & suspicious afraid of being left alone, lest she be cast into hell.

N.B. She had her 3rd child on Saturday morning last. The temperature has not been above 98.8.

(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, Arch. Chalmers, M.B., C.M.

Place of Abode Crocketford

DATED this first — day of June — 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, George R. Livingston
being (1) Doctor of Medicine of Edinburgh University, (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Carruthers Cottage, Lochrutton (2) State place of examination.
in the County of Kirkcudbright, seen and personally examined Margie Peat or Tait, 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.

George R. Livingston M.D

DATED this second day of June One thousand ~~eight~~ 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 Asylum to receive therein Margaret Peat or Tait. to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Anthony McDick, Lochrutton, Dumfries

Date 2nd June 1905.

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

I, George Lampion, 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) Anthony McDick, Inspector of Poor, Lochrutton, Certificates under the hands of George Robert Livingston and Archibald Chalmers, 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 Peat or Tait, Carruthers Cottage, Lochrutton, (a pauper) and that the said Margaret Peat or 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 Margaret Peat or Tait as a Patient into the ~~Public Asylum at Inverness, Royal Asylum at Perth, Royal Edinburgh,~~ 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 Peat or Tait, which accompanied the said Petition.

(2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(4) 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.

DATED [at Dumfries,] this third day of June One thousand ~~eight~~ hundred and five years.

To the Superintendent of the ~~Private~~ Public Asylum of ~~Montrose, Perth, Midlothian,~~ Crichton Royal Institution, Dumfries

Seven words deleted.

[*Signature*] Geo. Lampion

No. 9400.

Margaret Peat or Tait.
(Executrix)

Adm: 2nd June 1905.

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~~ Dumfries & Galloway, ~~of Kirkcudbright~~ *and his Substitutes,*— at Dumfries:

The Petition of John Lightbody, Albany Drive Land[illegible]

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Rebecca Lightbody, 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 Mary Rebecca Lightbody, to the Crichton Inst. Dumfries, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) John Lightbody

(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 June, — 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 Rebecca Lightbody.
2. Sex and Age,	Female. — ætat 48 yrs.
3. Married, Single, or Widowed,	Single. —
4. Condition of Life, and previous Occupation (if any),	Spinster. —
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Lanark.
7. Place where Found and Examined,	691 Shields Rd. Glasgow. S.
8. Length of time Insane,	6 months. —
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	47 years.
11. When and where previously under Examination and Treatment (5)	nil.
12. Duration of Existing Attack,	6 months.
13. Supposed Cause,	menopause.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no — not actively.
16. Whether Dangerous to others,	yes.
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,	John Lightbody. Albany Drive Bothw[illegible] Lanark. — 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 the date of latest admission or approximation thereto. If never 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 Third — day of June, — One thousand nine hundred and five.

(To be signed by the party applying) John Lightbody

T. & A. C.—Sept. 1903.

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, Robert Honey Watt, being a (1) Bachelor of Medicine & Surgery of University 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 Institution, Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Rebecca Lightbody, of Albany Drive, Lanark, and that the said Mary Rebecca Lightbody, is a (5) person of unsound 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; bursts into tears. Thinks she squints & that everybody else does so at her. She imagines the female patients are men dressed as women.—

(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 H. Watt

Place of Abode, Dumfries & Galloway Royal Infirmary

DATED this fifth day of June, 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, James William White, being a (1) Bachelor of Medicine and Master in Surgery, and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) 691 Shield Road, Glasgow, in the County of Lanark, separately from any other Medical Practitioner, visited and personally examined (4) Mary Rebecca Lightbody of Albany Drive, Lanark, and that the said Mary Rebecca Lightbody is a (5) person of unsound 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)

Attacks of violent excitement. Delusions as to nakedness of her mother. Fixed delusions as to designs upon her happiness by outsiders.—

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

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

Attacks of paroxysmal violence threatened.— Facts of self destruction

Name and Medical Designation, James William White

Place of Abode, 691 Shield Rd. Glasgow

DATED this 2nd day of June, 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, James William White,
being (1) Bachelor of Medicine and Master in Surgery
hereby certify, on soul and conscience, that I have this day, at (2) 691 Shields Rd
in the County of Lanark, seen and personally examined
Mary Rebecca Lightbody, 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 William White.

DATED this 2nd day of June, 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, Dumfries, ~~Asylum~~ to receive therein Mary Rebecca Lightbody,
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address John Lightbody Allbery drive, Lanark.

Date 3rd June 1905.

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

I, George Lampson, 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 Lightbody, Albany Drive, Lanark, Certificates under the hands of Robert Hosey Watt, and James William White, 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 Rebecca Lightbody, 691 Shields Road, Glasgow, and that the said Mary Rebecca Lightbody, 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 Rebecca Lightbody 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 Rebecca Lightbody 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 Fifth day of June One thousand nine hundred and five years. Two words deleted

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

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

[*Signature*] Geo: Lampson

No. 9401.

Mary Rebecca Lightbody

Adm: 3 June 1905.

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 Rev. Leonard Beauclerc Ashby. 10 Arthur Street, Belfast:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Harrison Ashby, — 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 Joseph Harrison Ashby, — 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*) Leonard Beauclerc Ashby.

(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 June, — One thousand nine hundred and five 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 Harrison Ashby.
2. Sex and Age,	Male. - 39 years -
3. Married, Single, or Widowed,	married -
4. Condition of Life, and previous Occupation (if any),	Engineer to Babcock & Wilcox.
5. Religious Persuasion, so far as known,	Church of England. (Boiler Makers)
6. Previous Place of Abode,	25 Blandford Road, Chiswick.
7. Place where Found and Examined,	Belfast.
8. Length of time Insane,	Six months.
9. Whether First Attack,	As far as is known. I.S dating from October 1904.
10. Age (if known) on First Attack,	39.
11. When and where previously under Examination and Treatment (5)	Keeley Institute; (Oct. 1904) + St Annes Virginia Water (Nov. 1904)
12. Duration of Existing Attack,	Six months.
13. Supposed Cause,	Inebriacy.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	Not as far as known. He assaulted a cab driver in Belfast.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper. Chiswick.
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,	Louey Ashby (Wife.) Bayonne. France. An aunt 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 Examination or treatment, state fact.

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

DATED this Sixth — day of June, — One thousand nine hundred and five years.

(*To be signed by the party applying*) Leonard Beauclerc Ashby. (Clerk in Holy Orders) P. p.

T. & A. C.—May 1905.

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, Richard James Purdon —
being a (1) Doctor of Medicine of 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) Bank Offices,
Belfast — in the County of
Antrim, Ireland, — separately from any other Medical Practitioner,
visited and personally examined (4) Joseph Harrison Ashby,
and that the said Joseph Harrison Ashby, 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) Says he is Agent for Wilcox & Robinson of Rugby, at a Salary of £2000 a year, Sub £250,000 worth every year at 5% commission — is also representative for Several firms all over Europe, Has been operated on for appendicitis, was Chairman several Companies for England for three years, all of which are delusions — Is nervous & has tremor of tongue — Insists "Spoon is pronounced Spoon" and, has matters of Mr. Chamberlain and personal power.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The Rev. Leonard B. Ashby, brother, informs me that Joseph Harrison Ashby for nearly Weak years been addicted to excess in alcoholic liquors, Since Oct he has been altogether unable to manage his affairs - travelling about the Country in aimless manner, Last to cause of dismay. has gone about in a frenzied condition -

Name and Medical Designation, Richard J. Purdon M.B. M.Ch. R.U.I.

Place of Abode 46 Great Victoria Street Belfast

DATED this 26th day of June, 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.

(6) *State the facts.*

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

I, the undersigned, H. R. Torrens, M.D.
being a (1) Registered Medical Practitioner, (M.D. L.R.C.S.I.)
and being in actual practice as a (2) Physician and Surgeon, (M.D. L.R.C.S.I.)
do hereby certify, on soul and conscience, that I have this day, at (3) Belfast Asylum
Antrim — in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Joseph Harrison Ashby,
and that the said Joseph Harrison Ashby, is a (5) Person of unsound 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) Delusion that he is owner of the Largest Motor in the world, capable of running 139 miles an hour; that he possesses a Steam Yacht, and is in receipt of a large Salary, and with at least £10,000 a year.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From Dr. Ashby, Wife that he believes that he is employed by a great many firms as agents; that he is an officer in the Army. Borrowing & running up Debts, is Long from large Claims due by

Name and Medical Designation, H. R. Torrens M.D. L.R.C.S.I.

Place of Abode, 126 Great Victoria St Belfast

DATED this 6th day of June (1905) 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, Richard Pardon,
being (1) a Doctor of Medicine of Royal University of Ireland
hereby certify, on soul and conscience, that I have this day, at (2) Ashbs Office Rupert
in the County of ~~Antrim, Ireland~~ ——, seen and personally examined
Joseph Harrison Ashby, ——, 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.

Richard Pardon

DATED this Sixth — day of June, — 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 Dumfries, Asylum to receive therein Joseph Harrison Ashby, —— to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Leonard Beauclerc Ashby.

Date 6th June 1905.

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

I, George Campion, 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) Rev: Leonard Beauclerc Ashby, 10 Arthur Street, Belfast, —— Certificates under the hands of Richard James Purdon, —— and H. R. Torrens, —— 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) Joseph Harrison Ashby, 25 Elm Park Road, Chiswick, (Petr's brother) and that the said Joseph Harrison Ashby, is an 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 Joseph Harrison Ashby, —— as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize (6) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph Harrison Ashby, —— 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.
(5) Public, District, Parochial, or Private.
(6) His, or her.

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

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

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

[*Signature*] Geo: Campion

No. 9402.

Joseph Harrison Ashby.

Adm: 6 June 1905.

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. Elizabeth Gardiner, Easton Hall, Lockerbie,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Gardiner, ——

(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 John Gardiner, —— to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Elizabeth Gardiner

(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 June, — One thousand nine hundred and five 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 Gardiner.
2. Sex and Age,	Male. 58.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Cow-taker & Labourer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Easton Hall, Lockerbie.
7. Place where Found and Examined,	do. do.
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,	Unknown.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Wastes to do for himself.
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 Gardiner, Easton Hall, Lockerbie. —Wife—
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	——

(5) If patient has been previously in an Asylum, state when, at date of latest admission or approximation thereto. If never 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 Seventh day of June — One thousand nine hundred and five years.

(*To be signed by the party applying*) Elizabeth Gardiner

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, James Macfarlane,
being a (1) Bachelor of Medicine & Master of Surgery 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) Easton Hall, Lockerbie, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) John Gardiner, Cattle-taker & Labourer, Easton Hall Lockerbie and that the said John Gardiner is a (5) person of unsound 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) Refuses & evades stating that he is full of pernicious disease & that it is dangerous to be near him, that all his organs are untrue & gone & that his mouth & teeth are full of poison.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Gardiner his wife states that he sleeps but at unusual times goes out at night remains out & that on one or two occasions he has attempted to drown himself & has wrenched for some days himself

(Name and Medical Designation), James Macfarlane M.B. C.M.

Place of Abode, Lockerbie

DATED this 11th day of June, One thousand nine hundred and June.

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, J. S. Bell
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) Easton Hall, Lockerbie, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) John Gardiner, Cattle-taker & Labourer, Easton Hall, Lockerbie, and that the said John Gardiner, is a (5) person of unsound 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 that he has rabies in the mouth, & that I shall have the disease in 24 hours, & die. Says that every man that comes near him will die & the time it will kill every man that sets his face to the door. Rushed down stairs in his nightclothes to turn me out of the house.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Gardiner (his wife) states that on several occasions he threatened to commit suicide by cutting his throat & that he threatened the same with a rope. That he became great from letters & scribbles, & is constantly talking of the terrible disease with he suffers.

(Name and Medical Designation), J. S. Bell M.B. C.M.

Place of Abode, Lockerbie

DATED this Seventh day of June, 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, James Macfarlane, being (1) a Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (2) Easton Hall, in the County of Dumfries, seen and personally examined John Gardiner, Easton 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. In Scots Insane Examination.

(2) State place at which Asylum is situated.

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

James Macfarlane M.D. L.R.

DATED this 7th day of June 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 Asylum to receive therein John Gardiner to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Elizabeth Gardiner

Date 7th June 1905.

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

I, George Carphin, Esquire, Advocate, Sheriff-Substitute, of ~~the~~ Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (4) Mrs Elizabeth Gardiner, Easton Hall, Lockerbie, Certificates under the hands of James Macfarlane, 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) John Gardiner, Easton Hall, Lockerbie (Wife) and that the said John Gardiner, 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 John Gardiner as a Patient into the 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 John Gardiner, which accompanied the said Petition.

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

(3) 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 Eighth day of June One thousand nine hundred and five Years two words deleted

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

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

[Signature] Geo: Carphin

No. 9403.

John Gardiner.

Adm: 4 June 1905.

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 William Clayton 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 Clayton 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 Ninth (*) day of June One thousand nine hundred and Five 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 Clayton
2. Sex and age,	male – 63
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous occupation (if any),	Shoemaker
5. Religious Persuasion, so far as known,	Prot
6. Previous place of abode,	Workhouse, Dumfries
7. Place where found and examined,	da do.
8. Length of time Insane,	a short time
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,	Nowhere
12. Duration of Existing Attack,	not known
13. Supposed Cause,	not known
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,	Dumfries.
18. Date of becoming Chargeable,	21st Apl 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,	Janet Varey or Clayton wife residing at 7 Briggs Ct ~~Friars Vennel~~ not 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 Ninth day of June One thousand nine hundred and Five years.

(To be signed by the party applying) Miles Mc Innes

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, 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) Poorhouse Dumfries, ——— in the County of Dumfries, ——— separately from any other Medical practitioner, visited and personally examined (4) William Clayton, pauper, Poorhouse Dumfries ——— and that the said William Clayton ——— is a (5) person of unsound 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 very stupid & confused & does not remember the days of the week. Wanders aimlessly about.

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

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

Name of Medical Designation, } Peter Murray Kerr M.B.

Place of Abode, 20 Castle Street Dumfries

DATED this Eighth day of June One thousand nine hundred and five 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, George Robert Livingston ——— being a (1) Doctor of medicine of 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) Poorhouse, Dumfries ——— in the County of Dumfries, ——— separately from any other Medical Practitioner, visited and personally examined (4) William Clayton, pauper, Poorhouse, Dumfries ——— and that the said William Clayton ——— is a (5) person of unsound 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 manner & appearance.
He is dull & stupid.
His conversation is incoherent.

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

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

Name of Medical Designation. } George R. Livingston M.D.

Place of Abode, 47 Castle St Dumfries

DATED this Ninth day of June One thousand nine hundred and five years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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) Dumfries
in the County of Dumfries, seen and personally examined
William Clayton, 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.

(1) State Medical qualification.
(2) State place of Examination.

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

P. Murray Kerr

Dated this eighth day of June One thousand nine hundred and five 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 William Clayton
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 McJames 28 Queen Street

Date, 8th June 1905.

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

I, George Campion, 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 McJames 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, entituled "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) William Clayton, Poorhouse, Dumfries, Pauper
and that the said William Clayton 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 William Clayton 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 Clayton 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 Ninth day of June One thousand nine hundred and five years.- The preprinted words deleted.-

Geo: Campion

To the Superintendent of the Public Crichton Royal Institution for Lunatics, at Dumfries.

No. 9404.

Name, William Clayton
(Dumfries)

Date of Admission, 9th June 1905.

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 at Dumfries~~ *and his Substitutes,—* at Dumfries.

The Petition of James Morrison, Inspector of Poor, Langholm;

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that William Linton,

your Petitioner's (3) 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 William Linton to the Southern Counties Asylum, Dumfries, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Jas Morrison Inspector of Poor, Langholm

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

DATED this 11th (4) day of June, 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,	William Linton
2. Sex and Age,	Male - 43 years. (1st Jan)
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,	Charles St (old) Langholm
7. Place where Found and Examined,	Police Station Langholm.
8. Length of time Insane,	2 weeks.
9. Whether First Attack,	Second attack.
10. Age (if known) on First Attack,	37 years.
11. When and where previously under Examination and Treatment (5)	Southern Counties Asylum, Adm: 4 Sept. 1899.
12. Duration of Existing Attack,	
13. Supposed Cause,	Drink.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Harmless so his sister says.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Langholm.
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:- Andrew Linton Butcher. or his Sister Mrs Hardie Caroline St Langholm. Hunter's Home Longtown
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 when, and date of latest admission or approximate date. If patient be 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 11th day of June, One thousand nine hundred and five.

(To be signed by the party applying) Jas Morrison.

T. & A. C.—May 1905.

P. p.

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.

I, the undersigned, John Gill, being a (2) Bachelor of Medicine &c Univ. Edinburgh, and being in actual practice as a (3) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (4) Police Buildings, Langholm, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (5) William Linton, Farm Servt Glendes Lr Old, Langholm, and that the said William Linton 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.:—

(7) *State the facts.*

1. Facts indicating Insanity observed by myself: (7)
When I ~~visited~~ saw him in the police cell he was busy washing his hands & feet in his own urine. His talk to me was incoherent & absurd, & his general appearance was that of a mentally unsound person.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (8)
Sub Inspector Henderson, Police Buildings, Langholm corroborates the above, & says he was restless & noisy for some hours & finally kept ceaselessly rubbing the floor with his bare feet for hours. When arrested he had been ringing about & &c and otherwise disturbing passers by.

Name and Medical Designation, John Gill M.B., &c.

Place of Abode. Langholm

DATED this eleventh day of June, One thousand nine hundred and five.

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.

I, the undersigned, Frank Henry Rae, being a (2) F.R.C.P.S.Ed. and being in actual practice as a (3) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (4) Police Buildings, Langholm, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (5) William Linton, Farm Servt Langholm and that the said William Linton 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.:—

(7) *State the facts.*

1. Facts indicating Insanity observed by myself: (7) When seen in the police cell he was walking round & round, at times getting on to his knees & throwing out his hands as in swimming. Refused to answer questions when put to him — & his general appearance is indicative of insanity.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (8)
As above stated by Sub. Inspector Henderson Langholm.

Name and Medical Designation, F Henry Rae F.R.C.P.S.

Place of Abode. Langholm

DATED this 11th day of June, 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, F. Henry Rae
being (1) L.R.C.P. & S.
hereby certify, on soul and conscience, that I have this day, at (2) Langholm
in the County of Dumfries, , seen and personally examined
William Linton, , 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.

F Henry Rae

DATED this Eleventh day of June, — 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 Linton,
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 Morrison Inspector of Poor Langholm.

Date 11th June 1905.

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

I, George Campion, Advocate, (1) Sheriff Substitute
of the Sheriffdom of Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) James Morrison, Inspector of Poor, Langholm,
Certificates under the hands of John Gill,
and Frank Henry Rae, 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 Linton, Police Station, Langholm, (Pauper), and that the said William Linton 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 Linton, as a patient into the (6) Public Asylum of Southern Counties and I authorize (7) this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Linton, 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.
(7) His, or her.

DATED [at Dumfries,] this Twelfth day of June, One thousand nine hundred and five years.

To the Superintendent of the (6) Public
Asylum of Southern Counties
Dumfries.

[*Signature*] Geo: Campion

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

No. 9405.

William Linton

(Langholm)

Adm: 11 June 1905.

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 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, — 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.

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

(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 Fifteenth (4) day of June, — One thousand nine hundred and five 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,	Dumfries.
8. Length of time Insane,	18 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 1895 was admitted into Crichton Royal Institution.
12. Duration of Existing Attack,	18 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. (Sister.) 236 South Norwood Hill. London.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If Patient has been previously in an Establishment, state when, and date of latest discharge or apprehension hereto. If under previously under Examination or Treatment, the fact.

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

DATED this Fifteenth day of June, — One thousand nine hundred and five years.

(To be signed by the party applying) Naylor Smythe

P. p.

T. & A. C.—May 1905.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Pela 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) William Kimberly Fuller Merchant. 236 South Norwood Hill Surrey and that the said William Kimberly 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) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

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

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

(4) *Insert 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.*

His insane appearance and manner he is very depressed and miserable looking. He took his breakfast because he believes he will be poisoned.

(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, Pela Murray Kerr M.B.C.M.

Place of Abode. 25 Castle Street Dumfries.

DATED this Thirteenth day of June — One thousand nine hundred and five years.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Fred: 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) The Crichton Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) William Kimberly Fuller, Merchant. 236 S. Norwood Hill, Surdon, and that the said William Kimberly 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) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

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

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

(4) *Insert 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 very reticent and declines to answer questions. He is depressed and has become weak and ill from self-imposed Starvation.

(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, Fred: Hugh Clarke M.B.

Place of Abode, Charlotte Street. Dumfries

DATED this fifteenth day of June — One thousand nine 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, Peter Murray Kerr
being (1) Graduate of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) Railway Station
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;

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 Nineteenth day of June, One thousand nine hundred and five 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 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 Upper Norwood London

Date 13th June, 1905.

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

I, George Sampson, 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) Naylor Smythe, Merchant, 236 South Norwood Hill, London, S.E. Certificates under the hands of Peter Murray Kerr, and Frederick Hugh Blarke 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 Kimberley Fuller, Merchant, 236 South Norwood Hill, London, Brother-in-Law, and that the said William Kimberley Fuller 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 William Kimberley Fuller as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) 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.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) His, or her.

DATED [at Dumfries] this Sixteenth day of June, One thousand nine hundred and five years.

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

[Signature] Geo. Sampson

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

No. 9406.

William Kinkaid Fuller.

Adm: 13 June 1905.

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 Grace J. Graham, 2 Eton Terrace, Belfast.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Alexander Arnold, your Petitioner's (3) Sister 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 James Alexander Arnold, — 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) Grace J. Graham

(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 June, — One thousand nine hundred and five 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 Alexander Arnold.
2. Sex and Age,	Male, 32 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Gentleman Teaching Abroad.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Hyde, England.
7. Place where Found and Examined,	Belfast.
8. Length of time Insane,	5 Weeks.
9. Whether First Attack,	1st. Attack.
10. Age (if known) on First Attack,	32
11. When and where previously under Examination and Treatment (5)	Belfast District Asylum for last 3 weeks.
12. Duration of Existing Attack,	Five Weeks.
13. Supposed Cause,	Domestic Troubles.
14. Whether subject to Epilepsy,	No; Lunacy 8 years ago.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Dublin~~ ~~Dumfries~~ ~~Board~~.
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,	Grace J. Graham (Sister) above designed. Uncle eccentric Wife died Childbirth.
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 when, and date of latest admission or approximation thereto. If ever previously under Treatment or Restraint, state the fact.

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

DATED this Thirteenth day of June — One thousand nine hundred and five years.

(To be signed by the party applying) Grace J. Graham.

P. p.

T. & A. C.—May 1905.

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, J. M. McKissack, being a (1) Doctor of Medicine, of 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) District Lunatic Asylum, Belfast, in the County of Antrim, separately from any other Medical Practitioner, visited and personally examined (4) James Alexander Arnold, and that the said James Alexander Arnold is a (5) lunatic and a proper person to be detained under Cure 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)
Rambling and incoherent in conversation. Delusions as to his mental & supernatural powers.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sister (Mrs Jane Graham) informed me that he attempted & threatened suicide.

Name and Medical Designation, J. M. McKissack. M.D. M.R.

Place of Abode, 17 University Square Belfast

DATED this 13th day of June 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, H Palmer, being a (1) M. B. B. Ch. R. U. I. and being in actual practice as a (2) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) District Lunatic Asylum, Belfast, in the County of Antrim, separately from any other Medical Practitioner, visited and personally examined (4) James Alexander Arnold, and that the said James Alexander Arnold 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) For several days was quarrelsome & abusive, is delusional & states he is the victim of a Jesuit Plot and that it is done to keep him & his wife apart. He is the victim of Telepathy

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Says he is telepathic, suffers from insomnia talks in a foolish manner. Information derived from Dr Jones and Belfast Asylum

Name and Medical Designation, H Palmer M.B.

Place of Abode, District Asylum Belfast

DATED this 13th day of June 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, Henry Laurence McKisack — M.C.Coun
being (1) a Doctor of Medicine of the Royal University of
hereby certify, on soul and conscience, that I have this day, at (2) Belfast
in the County of Antrim ——, seen and personally examined
James Alexander Arnold ——, 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.

H. L. Kisack. M.B. M.R.C.P.

DATED this 13th day of June 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 Asylum to receive therein James Alexander Arnold. to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister, Married,

Signature and Address Grace J Graham.

Date 2 Eton Terrace Rydal Rd
13th June 1905. Belfast

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

I, John Clerk, Esquire, Honorary, Sheriff Substitute of the (4) Dumfries and Galloway at Dumfries, having had produced to me, with a Petition at the instance of (5) Grace J. Graham, 2 Eton Terrace, Belfast ——
Certificates under the hands of H. L. M'Kisack ——
and J. Patrick —— 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 Alexander Arnold, District Lunatic Asylum, Belfast, (date omitted) and that the said James Alexander Arnold, is a (7) Lunatic ——
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Alexander Arnold as a patient into the (8) Public Asylum of Crichton Royal Institution, and I authorize (9) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Alexander Arnold, 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.
(9) His, or her.

DATED [at Dumfries,] this Fourteenth day of June One thousand nine hundred and five years. Two words deleted.

To the Superintendent of the (8) Public
Asylum of Crichton Royal Institution
at Dumfries.

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

[Signature] John Clerk

No. 9404.

James Alexander Arnold

Adm: 13 June 1905.

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,*—

The Petition of John Hamilton, Farmer Challoch, Leswalt, Stranraer

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Maggie Sloan Hamilton 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 Maggie Hamilton 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*) John Hamilton

(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 June One thousand nine hundred and 5

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,	Maggie Sloan Hamilton
2. Sex and Age,	Female 20 years last Birth.
3. Married, Single, or Widowed,	S.
4. Condition of Life, and previous Occupation (if any),	Domestic
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Challoch Leswall-
7. Place where Found and Examined,	" "
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)	never
12. Duration of existing Attack,	coming on gradually
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 the Family known to be or to have been Insane,	John Hamilton Challoch Leswall- by Stranraer Father none
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Establishment, state when, and state of latest symptoms or approximation thereto. If never 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 13th day of June One thousand nine hundred and 5.

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

T. A. C.—Oct. 1904.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, David Duke Munro being a (1) Bachelor of Medicine & Master of Surgery of Aberdeen 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) Shetland Lerwall Watson in the County of separately from any other Medical Practitioner, visited and personally examined (4) Maggie Sloan Hamilton (Spinster) and that the said Maggie Sloan Hamilton is a (5) person of unsound 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.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) vacant appearance cannot talk coherently, sometimes religious conversation, and changes from one subject to another without reason.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her mother says she has been getting worse lately. Is talking nonsense about law courts riding on horseback for prizes. Forgetting her work. She was to be married.

Name and Medical Designation, D. Duke Munro MB

Place of Abode, 17 Levis St Stromness

DATED this 12th day of June One thousand nine hundred and 5.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Hugh McMillan Smellie being a (1) Bachelor of Medicine & Master of Surgery of the University 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) Shetland Lerwall Watson in the County of separately from any other Medical Practitioner, visited and personally examined (4) Maggie Sloan Hamilton, Spinster and that the said Maggie Sloan Hamilton is a (5) person of unsound 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.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has a dazed stupid look. Rambles in her talk. Quotes scripture in an unconnected way. Tells me that she wants to get a horse to win the Derwic Purse &c &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her father tells me that she is very absent-minded. That she thinks she is mixed up in a lawcase. That she wished to ride a grey horse to Stromness to see Dr. Munro. & has never been on horseback in her life.

Name and Medical Designation, Hugh McMillan Smellie MB. Chm.

Place of Abode, Lake Cottage Sandwick Stromness

DATED this thirteenth day of June 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,
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 Laynie Honorary(1) Sheriff Substitute
of the (2) Sheriffdom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) John Hamilton
farmer Challoch Leswalt Stranraer
Certificates under the hands of David Burke Munro MB CM
and Hugh McMillan Smellie MB CM 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 Sloan Hamilton, Spinster, Challoch Leswalt and that the said
Maggie Sloan Hamilton 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 Sloan Hamilton as a patient into the (6) Southern Counties Asylum of Dumfries and I authorize (7) Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Maggie Sloan Hamilton which accompanied the said Petition.

DATED [at Stranraer] this thirteenth day of June
One thousand nine hundred and five years

To the Superintendent of the (6)
Southern Counties Asylum of Dumfries

[Signature] John Cameron

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

No. 9408.

Maggie Sloan Hamilton

Adm: 14 June 1905.

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 Robert Hoatson, High Street Dalbeattie,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie McLauchlan or Hoatson 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 Jessie mcLauchlan or Hoatson 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*) Robert Hoatson

(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 June 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,	Jessie mcLauchlan or Hoatson.
2. Sex and Age,	Female., 50. years.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	House wife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	High Street, Dalbeattie.
7. Place where Found and Examined,	Palnackie, Dalbeattie.
8. Length of time Insane,	about a month.
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,	a month.
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 her Family known to be or to have been Insane,	Husband. Robert Hoatson. High St. Dalbeattie. Sister Isabella at Palnackie no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Asylum, Hospital, or Poorhouse, state when, and also of latest admission approximate date thereto. If patient was previously under Examination or Treatment elsewhere, state where.

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

DATED this thirteenth day of June, One thousand nine hundred and five.

(*To be signed by the party applying*) Robert Hoatson

P p.

& A. C.—Oct. 1898.

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. and being in actual practice as a (2) ~~Dalbeattie~~ General Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Palmackie by Dalbeattie, ——— in the County of Kirkcudbright ——— separately from any other Medical Practitioner, visited and personally examined (4) Jessie Hoatson ——— ——— and that the said Jessie Hoatson ——— is a (5) person of unsound 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)
Walks about aimlessly - Wont eat or sleep. Has a distant mental facies - Wont answer questions

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Margaret Walker (a sister) says she walks about all day & mutters to herself - thinks she has starved her children and is very melancholy & depressed on that account. Wont clean or wash herself - needs to be fed in bed occasionally

Name and Medical Designation, } S. A. D. Gillespie M.B.C.M.

Place of Abode, Dalbeattie

DATED this thirteenth day of June, — 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 M'Morchat, ——— 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) Palmackie by Dalbeattie ——— in the County of Kirkcudbright ——— separately from any other Medical Practitioner, visited and personally examined (4) Jessie Hoatson ——— ——— and that the said Jessie Hoatson, ——— is a (5) person of unsound 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 entirely altered in her disposition, will not talk with me and is untidy & careless. Repeats herself about her conduct of the household.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Sister, Mrs Walker, tells me she refuses all nourishment and medicine, and that day and night she has to be controlled.

Name and Medical Designation, } R. M'Morchat M.B.C.M.

Place of Abode Dalbeattie

DATED this thirteenth day of June, — 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, Robert Stevenson, being (1) Bachelor of Medicine & Master in Surgery, hereby certify, on soul and conscience, that I have this day, at (2) Dalbeattie in the County of Kirkcudbright, seen and personally examined Jessie McLachlan or Hoatson, 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. M'Kechnie M.B.

DATED this thirteenth day of June, One thousand ~~eight~~ 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 Asylum to receive therein Jessie McLauchlan or Hoatson, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Robert Hoatson Dalbeattie

Date 14th June 1905.

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) Robert Hoatson, High Street, Dalbeattie, Certificates under the hands of Samuel Archibald David Gillespie, and Robert M'Kechnie — 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 M'Lauchlan or Hoatson, Salesmaker, Dalbeattie (Petitioner's wife) and that the said Jessie M'Lauchlan or Hoatson, 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 M'Lauchlan or Hoatson, 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 M'Lauchlan or Hoatson, 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 Sixteenth day of June One thousand ~~eight~~ hundred and five Years. Three words deleted.

To the Superintendent of the (7) Asylum of Crichton Royal ~~Institution~~ Public Institution at Dumfries.

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

[Signature] Geo: Campion

No. 9409.

Jessie McLauchlan for
Keatson.

Adm: 14 June 1905.

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~~ Dumfries & Galloway and his Substitutes,—at Dumfries:

~~of Kirkcudbright~~

The Petition of James M. Shaw, Inspector of Poor, Parish of Inch, Stranraer,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David McWhirter, 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 David McWhirter to the Southern Counties Asylum ~~Kingcase~~, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) James M. Shaw

(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 June, ——— One thousand ~~eight~~ nine hundred and five 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 McWhirter.
2. Sex and Age,	Male. 21 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,	Protestant
6. Previous Place of Abode,	44 Lochryan Place, Stranraer.
7. Place where Found and Examined,	44 Lochryan Street, Stranraer.
8. Length of time Insane,	from Birth, but not dangerous until now.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	from birth.
(5) If patient has been previously in an Establishment, state when, and date of latest admission or approximation thereto. If never previously under examination or treatment, state the fact. 11. When and where previously under Examination and Treatment (5)	not under treatment.
12. Duration of Existing Attack,	from birth.
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,	Inch 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,	Robert McWhirter his father, and Mary McWhirter his mother. 44 Lochryan Street Stranraer. None of the family has ever been insane. —
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 thirteenth day of June, ——— One thousand ~~eight~~ nine hundred and five.

(*To be signed by the party applying*) James M. Shaw
Inspector of Poor
Inch.

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, Andrew Clueckie,
being a (1) Bachelor of Medicine de 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)
44 Lochryan St, Stranraer,
in the County of Wigtown
separately from any other Medical Practitioner,
visited and personally examined (4) David Mc Whirter
Lochryan St Stranraer
and that the said David Mc Whirter is a (5) person of unsound 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 has the appearance of acute mania
He is suffering from delusions
He made an attack on his mother & threw
effect of his
He has been going about with dangerous weap
and threatening to use them.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His mother says that he has for ill will to
without cause attacked her violently to
that he talks nonsense.

Name and Medical Designation, Andr Clueckie M. B

Place of Abode, 75 George St Stran

DATED this thirtieth day of June One thousand ~~eight~~ 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, 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) 44
Lochryan Street, Stranraer,
in the County of Wigtown
separately from any other Medical Practitioner,
visited and personally examined (4) David Mc. White,
age 21, 44 Lochryan Street, Stranraer, and that
the said David Mc White, is a (5) person
of unsound 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) I saw him this afternoon in an acute
maniacal state - pale, breathless excited beyond
measure and armed with a stick. He tried me he
meant to do for his mother. (2) He is defective in intel

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mr Smith, missionary, informs me that he saw
going about the house this afternoon, carrying his
knives and threatening violence on his mother

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

Place of Abode Stranraer

DATED this thirteenth day of June, One thousand ~~eight~~ nine 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, Andrew Cluckie being (1) Bachelor of Medicine &c Glasgow hereby certify, on soul and conscience, that I have this day, at (2) Lochryan St. Stranraer in the County of Wigtown David M'Whirter Lochryan St Stranraer, 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.

(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.

Andrew Cluckie M.B. &c

DATED this thirteenth day of June — One thousand ~~eight~~ 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, Dumfries, ~~Asylum~~ to receive therein David M'Whirter to whom the foregoing Certificate of Emergency refers.

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

Signature and Address James M. Shaw Stranraer

Date 15th June 1905.

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

I, George Cranfion, Esquire, Advocate, (1) Sheriff-Substitute of ~~the~~ (2) Dumfries and Galloway ~~at~~ at Dumfries, having had produced to me, with a Petition at the instance of (3) James M. Shaw, Inspector of Poor, Inch, Stranraer, Certificates under the hands of Andrew Cluckie, and John Alexander Anderson, — 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 M'Whirter, 4 Lochryan Street, Stranraer (Scotland), and that the said David M'Whirter, 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 David M'Whirter as a Patient into the Public Asylum of Southern Counties, and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David M'Whirter, 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.

DATED [at Dumfries] this Sixteenth day of June One thousand ~~eight~~ hundred and five Years. Three words deleted

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

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

[Signature] Geo. Cranfion

No. 9410.

David McCorister.

(Dec'd)

Adm: 14 June 1905.

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 George Bell, Newton, Wamphray:

~~Humbly~~ sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Annie Bell 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 Bell 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) Geo Bell

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

DATED this 15th (4) day of June, 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,	Annie Bell.
2. Sex and Age,	female. 36. years.
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	helped with household work.
5. Religious Persuasion, so far as known,	protestant.
6. Previous Place of Abode,	Newton, Wamphray.
7. Place where Found and Examined,	at home. Newton. Wamphray.
8. Length of time Insane,	two months.
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	36 years.
11. When and where previously under Examination and Treatment (2)	never previously under treatment.
12. Duration of Existing Attack,	two 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,	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,	Geo Bell, Newton, Wamphray, father. none previously insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

If patient has previously been in an Asylum, state name and date of last admission or detention there. If previously under treatment elsewhere, state facts.

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

DATED this 15th day of June, One thousand nine hundred and five.

(To be signed by the party applying) Geo Bell

T. & C.—Dec. 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.*

I, the undersigned, William Park
being a (1) Doctor 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) Newton, Wamphray, Dumfries, in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Annie Bell of Newton, Wamphray
and that the said Annie Bell,
is a (5) person of unsound 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)

Wild staring appearance
says she is lost and cannot die.
says she has no heart - or if she has one it is

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

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

She is tearing & throwing herself about;
her mother says she is breaking things
in the house.

Name and Medical Designation, William Park M.D.

Place of Abode, Johnstone Bridge. Lockerbie

DATED this 14th day of June, 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.

(6) *State the facts.*

I, the undersigned, George Irving,
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) Newton, Wamphray, Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Annie Bell Newton,
and that the said Annie Bell,
is a (5) person of unsound 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 nervous & excited, & has delusions as to her future and says she is lost, & yet cannot die: that her heart is one of stone, & her whole conduct & behaviour are irrational.

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

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

Mrs Bell her mother informs me that she is violent & destructive, destroying everything she can lay her hands upon.

Name and Medical Designation, George Irving M.

Place of Abode, Lockerbie

DATED this 15th day of June, 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 William Park,
being (1) Doctor of medicine,
hereby certify, on soul and conscience, that I have this day, at (2) Newton Ma
in the County of Dumfries, seen and personally examined
Annie Bell, 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.

William Park M. D.

Dated this 14th day of June, 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 Annie Bell
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Geo. Bell Newton Wamphray

Date June 15th 1905.

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

I, George Campion, Advocate, Sheriff Substitute,
of the (1) Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (2) George
Bell, Newton, Wamphray,
Certificates under the hands of William Park,
and George Ewing 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 Bell, Newton, Wamphray, (Peters daughter), and that the said
Annie Bell, 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 Bell 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
Bell, 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 Seventeenth day of June, One thousand nine hundred and five years.

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

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

[Signature] Geo: Campion

No. 9+11

Annie Bell.

Adm: 15 June 1905.

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, ~~of the (2) County of Dumfries~~

The Petition of James Richardson, Inspector of Poor, Middlebie,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that David Ritchie, 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 David Ritchie to the ~~Lunatic~~ Royal Asylum, Dumfries, and to sanction the admission into the said Asylum.

(*To be signed by the Party applying*) James Richardson

(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 June, 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,	David Ritchie.
2. Sex and Age,	M. 32.
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,	Englefield.
7. Place where Found and Examined,	Do.
8. Length of time Insane,	~~From~~ Five days.
9. Whether First Attack,	No. Second attack.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5)	Middlebie. Crichton Inst. 1890. 1892.
12. Duration of Existing Attack,	
13. Supposed Cause,	Carelessness & Drink.
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 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,	James Ritchie—his brother—Englefield, Lockerbie.
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 Medical treatment state it.

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

DATED this Seventeenth day of June, One thousand nine hundred and five.

(*To be signed by the party applying*) James Richardson
Inspector of Poor.

T. & A. C.—June 1902.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Carruthers,
being a (1) Lic: Roy: Coll Phys: Edin & Lic: Fac: Phys: & Surg:
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) Eaglesfield Middlebie, Dumfries, — separately from any other Medical Practitioner visited and personally examined (4) David Ritchie, Eaglesfield hawker,
and that the said David Ritchie, is a (5) person of unsound 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 is excited in appearance, and restless in manner. He talks incessantly and incoherently. He says he is a large contractor and has many houses engaged. -

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The brother says patient has for a week been changed in his manner, & is now very restless, and at times almost unmanageable. He rambles in his talk

Name and Medical Designation, William Carruthers RSE Phys & Surg

Place of Abode, Kirkpatrick Flemming

DATED this seventeenth day of June, One thousand nine hundred and five. -

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

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

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

(4) *Insert 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 Duncan Logan,
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) Eaglesfield Middlebie, Dumfries, — separately from any other Medical Practitioner visited and personally examined (4) David Ritchie, Eaglesfield pauper,
and that the said David Ritchie, is a (5) person of unsound 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 constantly restless & talks incessantly, quite incoherently making remarks such as that he has just bought Castlehill, also property in Sydney Australia. He stated that he can direct lightning to go any where he chooses.

2. Other facts (if any) indicating Insanity communicated to me by others: (7). His mother states that he is quite unmanageable

Name and Medical Designation, Geo Duncan Logan MB

Place of Abode, Ecclefechan

DATED this Seventeenth day of June, — One thousand nine hundred and five -.

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

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

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

(4) *Insert 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, William Carruthers,
being (1) Lic. Roy. Coll. Phys. Edin.,
hereby certify, on soul and conscience, that I have this day, at (2) Eaglesfield
in the County of Dumfries, seen and personally examined
David Ritchie,
, 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 seventeenth day of June 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
Asylum to receive therein David Ritchie,
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address James Richardson, Inspector of Poor

Date 17 June 1905.

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

I, George Sampson, Advocate, Sheriff-Substitute
of Dumfries & Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (4) James
Richardson, Inspector of Poor, Middlebie,
Certificates under the hands of William Carruthers,
and George Duncan Logan, 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)
David Ritchie, Eaglesfield, Lochmaben, (Pauper) and that the said
David Ritchie, 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 David Ritchie 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 David Ritchie, 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.

(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 Nineteenth day of June, one thousand nine hundred and five years.

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

[Signature] Geo. Sampson

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

No. 94+12.

David Ritchie.

(Riddlebie)

Adm: 14 June 1905.

14,890.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

BOARD OF LUNACY
RECEIVED
JUN 16 1905

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned (1) James McMuldrow
being desirous to transfer Charles A. J. Macmuldrow
at present a Patient in Royal Asylum, Cartvadel, Glasgow and (2) 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) 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."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Charles Alfred James Macmuldrow
2. Sex and Age,	Male. 34.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	In residence with Parents. None
5. Religious Persuasion, so far as known,	Presbyterian
6. Parish to which the Lunatic (if a Pauper) is chargeable,	not a pauper
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 McMuldrow. Father Kirkcudbright Brother. had recently Religious Mania

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 McMuldrow

(3) Father

(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 15 day of June One thousand nine hundred & five

~~hundred and five 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.

T. & A. C. Jeffrey, 1903.

MEDICAL CERTIFICATE.

I, the undersigned Landee A. Oswald

(1) Name Asylum. hereby certify that I have this day at (1) Gartnavel asylum personally examined Charles Macmuldrow – who has been

(2) Insert Date of Admission. Patient in said Asylum since (2) 19th March 1905 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,

(4) Describe Mental State. (3) may be dangerous to others. I also certify, with respect to the Mental State of the Patient, that (4) it is one of excitement with delusions of grandeur & he would suffer from General Paralysis

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5)

it is poor

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

(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 :—

(Signature) Landee A. Oswald

(Medical Qualification) M.B.

(Date) 16th June 1905.

No 9418.
Charles A. J. Macmuldrow.
Adm: 20 June 1905.

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 MacMuldrow from Glasgow Royal Asylum, Gartnavel 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. Spence
Secretary.

DATED at Edinburgh, this 14th day of June One thousand nine hundred and five.

Date of Sheriff's Order *[to be inserted at the Office of Board].*

20th March 1905.

N.B. This Form shall accompany the keeping of the Superintendent of the Asylum or the order of the Sheriff thereof.

[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 John Jardine, Inspector of Poor, Johnstone Lockerbie.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates that Mina Byers, Edgemoor, Johnstone,

your Petitioner's (1) 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 authorise the transmission of the said Mina Byers Edgemoor Johnstone ——— to the Crichton Royal Institution at Dumfries, and and to Sanction the — 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) John Jardine

DATED this 20th — (2) day of June, — One thousand nine hundred and five.

(2) The date of the Petition must be within fourteen clear days before or after 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,	Mina Byers.
2. Sex and Age,	female. 24 years.-
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any).	housemaid.
5. Religious persuasion, so far as known,	protestant.
6. Previous Place of Abode,	Ellangowan, Beaasden, Glasgow.
7. Place where Found and Examined,	Edgemoor.
8. Length of Time Insane,	14 days.
9. Whether First Attack,	yes. 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 previously under treatment.
12. Duration of Existing Attack,	14 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,	New Kilpatrick.
18. Date of becoming Chargeable,	20th June 1905.
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,	George Boyes, Edgemoor St Anns Lockerbie. father. none ever previously 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 19th — day of June, — One thousand nine hundred and five.

(To be signed by party applying) John Jardine Inspector

MEDICAL CERTIFICATE No. I.

I, the undersigned William Park, ——
being a (1) Doctor 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) —
Edgemoor, Johnstone, —— in the County of
Dumfries, — separately from any other Medical Practitioner,
visited and personally examined (4) Mina Byers, ——
Edgemoor, a pauper, —— and that
the said Mina Byers, —— is a (5)
person of unsound 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. Anxious egotist manner.
2. Quick, wandering manner of talking
3 Says she wants to put all people right & make room for all good people.

2. Other facts (if any) indicating Insanity communicated to me by
others: (7)
Whenever she hears a cock crow she says call out
Peter Peter he was denied.
Says it was hard that she should be harassed trying to put
other people right.

Name and Medical Designation, William Park M.D.
Place of abode, Johnstone Bridge Lockerbie

Dated this nineteenth day of June, — One thousand
nine eight hundred and five.

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

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

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

(4) *Insert 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 George Irving, ——
being a (1) Doctor of Medicine & Member 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) Edgemoor
Johnstone, —— in the County of
Dumfries — separately from any other Medical Practitioner,
visited and personally examined (4) Mina Byers, Pauper,
Edgemoor, Johnstone Dumfriesshire, —— and that
the said Mina Byers, —— is a (5)
person of unsound 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) Nervous dis
& has delusions that she is her own enem
& that people are always looking at her
& that it is her office duty to teach others
right.

2. Other facts (if any) indicating Insanity communicated to me by
others: (7) Her Mother informs me that she Mina By
does not sleep & does not know what
it is unless she is tired.

Name and Medical Designation, George Irving M.D.
Place of abode, Lockerbie.

Dated this nineteenth day of June — One thousand
nine eight hundred and five.

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

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

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

(4) *Insert 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 William Park
being (1) Doctor of Medicine,
hereby certify, on soul and conscience, that I have this day, at (2)
Edgemoor,
in the County of Dumfries, seen and personally examined
Mina Byers, , 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.

William Park. M. D

DATED, this nineteenth day of June, — One thousand ~~eight~~ 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 at Dumfries, to receive therein Mina Byers,
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 Jardine Inspector of Poor Johnstone,

Date, 19 June 1905.

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

I, George Lampion, 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) John Jardine, Inspector of Poor, Johnstone, Certificates under the hands of William Park, and George Irving, 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) Mina Byers, Edgemoor, Johnstone, (Pauper), and that the said Mina Byers, 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 Mina Byers 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 Mina Byers, 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 first day of June, One thousand ~~eight~~ nine hundred and five years. Five printed words deleted. —

To the Superintendent of the Public Asylum of Crichton Royal Institution for Lunatics, at Dumfries.

Geo. Lampion

No. 9414.

Name, Nina Byers
Johnstone
(nee Kilpatrick)

Date of Admission, 20 June 1905.

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~~ Dumfries and Galloway — *and his Substitutes,*— at Dumfries.

The Petition of Agnes Carter or Wright widow residing at Steadstone, Dalbeattie, in the Parish of Urr.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Wright,

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

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 Mary Wright to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum

(To be signed by the Party applying) Agnes Carter or Wright

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

DATED this 21st (3) day of June, One thousand eight 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 Wright.
2. Sex and Age,	Female, 34 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,	Steadstone, Parish of Urr.
7. Place where Found and Examined,	Steadstone.
8. Length of time Insane,	about 8 or 9 years.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	about 26 years.
11. When and where previously under Examination and Treatment (5)	about 3½ years ago was under treatment in Crichton Royal Institution.
12. Duration of Existing Attack,	Has never entirely recovered
13. Supposed Cause,	Do not know.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Doubtful (Father lately committed suicide)
16. Whether Dangerous to others,	Do.
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,	Mother. at Steadstone as above Brother. David Wright, Chirk of Dalbeattie. Father committed suicide a week ago. An Uncle drowned himself.
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 21st day of June, One thousand ~~eight~~ nine hundred and five.

(To be signed by the party applying) Agnes Carter or Wright

T. & A. C.—Oct. 1896. P p.

If patient has previously been in an Asylum, state latest date or approximate thereof. If under previous treatment state fact.

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 (Chirs. 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) Stedstone,
Dalbeattie in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Mary Wright
and that
the said Mary Wright, is a (5) person of
unsound 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)
Gt guilt entertains in her health and general behaviour
Habits perverted fits of the nature, and the without
any reasonable cause - Has been in such a mental
condition for some years. Was in Asylum before.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Agnes Wright (her sister) states she is getting very
violent, has fits muttering to herself & various
violent generally - Wanders about the house during
the night - thinks she is being badly treated, &c

Name and Medical Designation, S. A. D. Gillespie
M.B. Edin. C.

Place of Abode, Dalbeattie

DATED this 21st day of June, One thousand ~~eight~~ 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 M'Riechat
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) Steedstone
by Dalbeattie, in the County of
Kirkcudbright, separately from any other Medical Practitioner,
visited and personally examined (4) Mary Wright
and that
the said Mary Wright, is a (5) person of
unsound 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 a previous
occasion I certified her insane, She is again
better and calmed and her memory is very
defective -

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Since her father's death a short time ago she
has exaggerated notions of her authority in the
home, her mother tells me, the sister tells me she
is helpless & will be controlled.

Name and Medical Designation, R. M'Riechat

Place of Abode Dalbeattie

DATED this twenty first day of June, One thousand ~~eight~~ 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, Samuel Archd. David Gillespie being (1) Bachelor of Medicine & Master in Surgery (Edin.) hereby certify, on soul and conscience, that I have this day, at (2) Gladstone, Dalbeattie in the County of Kirkcudbright, seen and personally examined Mary Wright, 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.

Sd. S. A. D. Gillespie M.B. C.M. Edin.

DATED this 21st day of June, One thousand ~~eight~~ 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 Mary Wright to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Agnes Carter Wright

Date 21st June, 1905.

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

I, George Campion, 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) Agnes Carter or Wright, Widow, Gladstone, Dalbeattie, Certificates under the hands of Samuel Archibald David Gillespie and Robert McKerchar, 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 Wright, Gladstone, Dalbeattie, (Peter's daughter), and that the said Mary Wright, 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 Wright, 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 Wright, 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 June, One thousand eight hundred and five years.

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

[*Signature*] Geo: Campion

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

No. 9415.

Mary Wright.

Adm: 21 June 1905.

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) Sheriff or Stewartry.

Unto the Honourable the (1) Sheriff of the ~~Stewartry~~ Dumfriesshire & Galloway, and his Substitutes,—

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 David Pool, 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 David Pool, 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 Laurie

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

DATED this 23rd (3) day of June, — One thousand nine hundred and June.

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 Pool.
2. Sex and Age,	Sex male - age 41 years.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	Labourer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	6 Carlyle Place, Annan.
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	about four months.
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 four months.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	Doubtful.
16. Whether Dangerous to others,	yes.
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,	Mrs Helen Pool. 6 Carlyle Place. Annan. - Wife. - No member of family known to have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

If patient has previously been an Inmate, state date of last Admission or Appointment thereto. If previously under Examination or Treatment state facts.

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

DATED this 23rd day of June — One thousand nine hundred and June.

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

MEDICAL CERTIFICATE, No. I.

I, the undersigned, [illegible] Irvine,
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) 6 Carly
Annan, in the County of
Dumfries, separately from any other Medical Practitioner
visited and personally examined (4) David Pool Pauper
Place, Annan Labourer & Pauper and that
the said David Pool 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) Has ceased some
weeks to Interfere him, is afraid to
trust himself near the fire in case
of drowning himself.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Pool, his wife, has threatened
to cut her throat and has on
a Killing the complaint of his ho

Name and Medical Designation, A Irvine Annan

Place of Abode, Annan

DATED this 23rd day of June, One thousand
nine hundred and [illegible].

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

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

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

(4) *Insert 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, William Lockerbie,
being a (1) graduate in medicine & surgery of
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) 6 Carly
Place, Annan, in the County of
Dumfries, separately from any other Medical Practitioner
visited and personally examined (4) David Pool 6 Carly
Place, Annan Labourer & Pauper, and that
the said David Pool is a (5) person
of unsound 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) Attitude, de
apathetic: will not talk except matters
himself: that same thing over & over again
that I could not make out. Fancies he
lost every thing, been starved.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Pool states that he has threatened to
all the inmates of his house & is imagining
starving. She cannot get him to go out of
house at all.

Name and Medical Designation, W Lockerbie M.B.C.M.

Place of Abode, Edinam House Annan

DATED this 23rd day of June, One thousand
nine hundred and five.

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

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

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

(4) *Insert 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, D. Hay Mac Ilwraith, being (1) Graduate of the University of Glasgow hereby certify, on soul and conscience, that I have this day, at (2) 6 Carlyle Place in the County of Dumfries, seen and personally examined David Pool, 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.

D. Hay Mac Ilwraith M.B. & C.M.

DATED this 23rd day of June 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 David Pool 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 23 June 1905.

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

I, George Campion, Advocate, (4) Sheriff-Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) John Laurie, Inspector of Poor, Annan, Certificates under the hands of J. J. Howie Muir, and William Lockerbie, 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) David Pool, 6 Carlyle Place, Annan, (Pauper) and that the said David Pool, is a (7) 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 David Pool 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 David Pool, 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 Twenty fourth day of June, One thousand nine hundred and five years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution Dumfries.

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

[Signature] Geo: Campion

No. 9416.

David Pool.
(Annan)

Adm: 23 June 1905.

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) Shire *of* Ayr *and his Substitutes,—*

The Petition of Mrs. Jessie Frew, Stafla, Ayr

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Morton, residing at Stafla, Ayr 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 James Morton to the Crichton Royal 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) Jessie Frew.

(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 June. 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,	James Morton
2. Sex and Age,	Male, 27.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Been in S. Africa.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Stafla Ayr.
7. Place where Found and Examined,	Stafla Ayr
8. Length of time Insane,	Two months
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	27.
11. When and where previously under Examination and Treatment (5)	At home previously under treatment
12. Duration of Existing Attack,	Two months
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. Jessie Frew. Stafla. Ayr 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 and date of latest admission thereto. If previously under medical treatment, state fact.

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

DATED this 22nd day of June One thousand nine hundred and five

(To be signed by the party applying) Jessie Frew.

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, Robert A Morton
being a (1) M.D. 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) Staffa Aye. Aye
in the County of Argyll
separately from any other Medical Practitioner, visited and personally examined (4) James Morton. Staffa Aye
and that the said James Morton is a (5) Person of unsound 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) Vacant expression. Sits laughing by himself. No notion of time. Says he has been away 4 months or so visiting when he never has out of the house. Took on that he has stealing his money & watch.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Both Mr Jas Fraser Staffa Aye informs me that he has charged him for stealing his pipe etc. & tries to injure him with the Authorities stating they have great difficulty in getting him out of bed. Patient often does not know where he is.

Name and Medical Designation, Robert A Morton M.D.

Place of Abode Lethendy. Aye.

DATED this 22nd day of June 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, Fergus McKenna
being a (1) M.B. Ch. 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) Staffa Aye.
in the County of Argyll
separately from any other Medical Practitioner, visited and personally examined (4) James Morton Staffa Aye
and that the said James Morton is a (5) person of unsound 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) Vacant appearance. Sits for long intervals without talking. Takes fits of laughing. Has no idea as to time nor places visited. Some of his friends without cause. Told me that he had been at certain places where he had gone not. Told me that his friends had stolen things from him.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) ~~Accused~~ Has been told me that he blames her for stealing his articles his goods. Has been ill-treating his children.

Name and Medical Designation, Fergus McKenna M.B. Ch.

Place of Abode, 1 Ramsay Pl. Tobermory. Aye.

DATED this 22nd day of June 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,
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 Campbell Rhamp (1) Sheriff Substitute of the (2) County of Ayr
having had produced to me, with a Petition at the instance of (3) Mrs Jessie Brown, Stafla, Ayr
Certificates under the hands of Robert A. Morton MD and Eugene McKenna MB CM 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 Morton residing at Stafla, Ayr and that the said James Morton 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 Morton as a patient into the (6) Crichton Royal ~~Asylum of~~ Institution Dumfries and I authorize (7) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Morton which accompanied the said Petition.

DATED [at Ayr] this 23rd day of June One thousand nine hundred and Five

To the Superintendent of the (8) Crichton Royal ~~Asylum of~~ Institution Dumfries

[Signature] J Shaw

(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) His, *or* her.
(8) Public, District, Parochial, *or* Private.

No. 9414.

James Horton

Aden: 22d June 1905.

14,893.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 18.

BOARD OF LUNACY
REC'D 22 JUN 1906

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned (1) William Dobson Valentine, Photographic Publisher Dundee being desirous to transfer Walter Young at present a Patient in Perth Royal Asylum and (2) who is my brother in law my wife being his nearest relative - from the said Asylum to the Dumfries 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) 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."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Walter Young
2. Sex and Age,	Male - aged about 52
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Master of Arts - Library Warden
5. Religious Persuasion, so far as known,	
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,	

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*) W D Valentine

(3) Brother in law

(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 Twenty first day of June One thousand nine hundred and five.

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. —June 1903.

MEDICAL CERTIFICATE.

I, the undersigned Alexander Reid Marshall

(2) Name Asylum. hereby certify that I have this day at (2) Perth Royal Asylum

personally examined Walter Young who has been

(3) Insert Date of Admission. Patient in said Asylum since (3) 20 August 1890 and I certify that

(4) Insert "is," or "is not," as the case may be. the said Patient is a person of unsound mind, (4) is not epileptic, (4) is not suicidal,

(4) is not dangerous to others. I also certify, with respect to the Mental State of

(5) Describe Mental State. the Patient, that (5) he labours under dementia with

delusions as to his position here.

(6) Describe Bodily State. and with respect to the Bodily State of the Patient, that (6) it is fairly good.

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

(7) Insert "the following are," or "there are no," as the case may be. I further certify that (7) 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 is usually in good health, but sometimes requires

to be controlled in regard to excessive exercise

(Signature) A Marshall

(Medical Qualification) MD Aberd.

(Date) 19th June 1905

No 9418.
Walter Young.
Adm: 30 June 1905.

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 Walter Young,

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. A. Pearce
Secretary.

DATED at Edinburgh, this 22nd day of June One thousand nine hundred and five.

Date of Sheriff's Order *[to be inserted at the Office of Board].*

21st August 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.

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 W. E. Withnell. 42 St. Auenham Street. Preston.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Emily Withnell your Petitioner's (2) Husband 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 ~~Royal Asylum, Montrose~~ Elizabeth Emily Withnell to the Royal Crichton 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) W. E. Withnell

(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 five 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 Emily Withnell
2. Sex and Age,	59 Female.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Wife of an Architect,
5. Religious Persuasion, so far as known,	Church of England,
6. Previous Place of Abode,	42 St Auenham St. Preston Lancs
7. Place where Found and Examined,	42 St Auenham St, Preston, Lancs.
8. Length of time Insane,	Gradually growing insane these past three years.
9. Whether First Attack,	
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (3)	Not in any Establishment,
12. Duration of Existing Attack,	See above
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Has threatened Suicide.
16. Whether Dangerous to others,	Not Dangerous.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	William Edwin.
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,	W. E. Withnell. 42 St Auenham St. Preston. Husband. Not known.
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 Thirtieth day of June One thousand nine hundred and five years.

(To be signed by the party applying) W. E. Withnell

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. McNaught.
being a (1) L.R.C.P.S.Ed., L.R.
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 42 St Ann
Preston Lancs
in the County of Lancashire, separately from any other Medical Practitioner
visited and personally examined (4) Elizabeth Emily Wilkinson
42 St Ann's St. Preston
the said Elizabeth Emily Wilkinson is at present (5) insane
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) Loss of memory
Emotional, Suspicious. Mischievous & Commits
Suicide. Melancholy. Delusions.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Husband States Tried to Commit Suicide in Bath Some
Ago. Several times threatened Suicide, Loss of memory
Very depressed & Suspicious.

Name and Medical Designation, J. McNaught. L.R.C.P.
Place of Abode, 1. Latham St, Preston
DATED this 29 day of June 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.

(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) Elizabeth Emily Wilkinson
42 St. Annbank St. Preston. Lancashire
the said Elizabeth Emily 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)
An insane appearance and manner
Loss of Memory.
Unmanageable and depressed.
Refuses her food

(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 Dumfries
DATED this 30th day of June One thousand
nine hundred and four 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, Jno McNeague.
being (1) L.R.C.P.S.Ed.
hereby certify, on soul and conscience, that I have this day, at (2) Preston Lancs.
in the County of Lancashire, seen and personally examined Elizabeth Emily Withnell, 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) Royal Crichton 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.

Jno McNeague. L.R.C.P.Ed.

DATED this 29th day of June 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 Royal Crichton Institution Asylum to receive therein Elizabeth Emily Withnell to whom the foregoing Certificate of Emergency refers.

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

Signature and Address W. Withnell

Date 30th June 1905.

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 this produced to me, with a Petition at the instance of (2) William Edwin Withnell, 42 Great Avenham Street Preston, Certificates under the hands of John McNeague, 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) Elizabeth Emily Withnell 42 Great Avenham Street, Preston, (Patient's Wife) and that the said Elizabeth Emily Withnell is an (5) 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 Elizabeth Emily Withnell 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 Elizabeth Emily Withnell 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 five years.

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

[Signature] Geo: Campion

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

No. 9419.

Elizabeth Emily Kithnell

Adm: 30 June 1905.

14,900.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

BOARD OF LUNACY
RECD 5 JUN 1905

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT A TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned (1) John Gilmour, Senior having desirous to transfer John Gilmour
present a Patient in Glasgow Royal Asylum and (2) whose father I am
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) 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."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length, ... John Gilmour
2. Sex and Age, ... male - 43 -
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. Parish to which the Lunatic (if a Pauper) is chargeable, ... not a pauper.
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 father, the petitioner, 95 & 8 Sandyhall St Glasgow
or his wife Emma Gilmour
35 West Kebble St, Abbeyhill
None stated

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) John Gilmour

(3) Father

(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 28th day of June One thousand nine hundred and five 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.

T. & A. C. Feby. 1903.

MEDICAL CERTIFICATE.

I, the undersigned Landee A. Oswald

(1) Name Asylum.

hereby certify that I have this day at (1) Gartnavel Asylu personally examined John Gilmour —— who has be

(2) Insert Date of Admission.

Patient in said Asylum since (2) 16th August 1904 and I certify

(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) may be quiet (3) is not dangerous to others. I also certify, with respect to the Mental Sta

(4) Describe Mental State.

the Patient, that (4) it is one of delusion. He bel that his children & his wife are being murdered for hi that he has no brain or mind. that his natural feeli have left him. that he is an outcast from society

(5) Describe Bodily State.

and with respect to the Bodily State of the Patient, that (5) He is fair, but he has some marks probably of specific character

and that there is nothing in the Mental or Bodily State of the Patient to make rem to the (3) Crichton Royal — Asylum inadvisable;

(6) Insert "the following are," or "there are no," as the case may be.

I further certify that (6) the following facts known to me as to the history of the Patient, bearing upon risk of suicide or danger to others, which I th ought to be brought under the notice of those who are to have charge of the Patient:—

His delusions being those mainly depression make a suicidal tende possible, but there has been no ac attempt.

(Signature) L. A. Oswald

(Medical Qualification) M.B.

(Date) 28. June 1905.

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 tran of John Gilmour from Glasgow Royal Asylum to Crichton Royal Institution, Dumfri and the Board having considered such Application and the accompanying Medi Certificate, do hereby authorize the transfer, at any time within fourteen days from t date hereof, of the said patient as requested.

W. A. Hence

Secretary.

DATED at Edinburgh, this 29th day of June One thousand nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

14th August 1904.

No. 9420.
John Gilmour.
Adm: 4 July 1905.
GST Lanark

N.B.—*This form shall remain in the keeping of the Superintendent of the Asylum for the Order of the Sheriff 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 David Denard, 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 David Denard, 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 date of the Medical Certificates.

DATED this Seventh — (*) day of July, — One thousand nine hundred and Five 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 Denard.
2.	Sex and age,	Male - 72.
3.	Married, Single, or Widowed,	widower.
4.	Condition of Life, and previous occupation (if any),	blogger.
5.	Religious Persuasion, so far as known,	Protestant.
6.	Previous place of abode,	52 ft Queensberry St: Dumfries.
7.	Place where found and examined,	52 ft Queensberry St: Dumfries.
8.	Length of time Insane,	a week or so.
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,	Nowhere.
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,	6th 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	Eliz: Denard or Simins daughter residing at Bankend Cottage Dumfries, not 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 Sixth — day of July, — One thousand nine hundred and Five years.

(To be signed by the party applying) Miles Mc Innes

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, J. A. Gordon Mary,
being a (1) Bachelor of Medicine and Surgery of the University of Aberdeen
and being in actual practice as a (2) General Practitioner,
do hereby certify, on Soul and Conscience, that I have this day, at (3) 52 Queensberry St Dumfries, in the County of Dumfriesshire, separately from any other Medical practitioner, visited and personally examined (4) David Menard, 52 Queensberry St Pauper, and that the said David Menard, is a (5) person of unsound 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 manner and appearance. Believes he has got a situation in Edinburgh. He had all the furniture of the house turned upside down.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His daughter Mrs Glennie informs me he sets to papers and the furniture. He will not go to bed at night. Has taken to swearing at her.

Name of Medical Designation, J. A. Gordon Mary

Place of Abode, 20 Castle Street

DATED this twelfth day of July, One thousand nine hundred and five 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, Andrew Stewart Wilson,
being a (1) Bachelor of Medicine & Bachelor of Surgery 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) 52 Queensberry St Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) David Menard, Blogger, 52 Queensberry St Pauper, and that the said David Menard, is a (5) person of unsound 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 manner & appearance. His unusual behaviour. States he sees persons who are not present.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His daughter Elizabeth Menard residing at 52 Queensberry St states that his behaviour has been violent. Went to burn the furniture of rooms down & has on several occasions almost set the house on

Name of Medical Designation, Andrew Stewart Wilson

Place of Abode, 47 Castle Street Dumfries

DATED this tenth day of July, One thousand nine hundred and five years.

CERTIFICATE OF EMERGENCY.

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

I, the undersigned, J. S. Gordon Gray,

being (1) a Bachelor of Medicine and Surgery of the University of Aberdeen

hereby certify, on Soul and Conscience, that I have this day, at (2) 52 Queensberry Street, Dumfries,

in the County of ~~Dumfriesshire~~ Dumfries, seen and personally examined David Denard, Pauper, 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.

(1) State Medical qualification.

(2) State place of Examination.

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

J. S. Gordon Gray

DATED this sixth day of July, One thousand nine hundred and five 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 David Denard, 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 St

Date, 6 July, 1905 Dumfries

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

I, George Lawson, 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) Miles Mc Innes Inspector of Poor, Dumfries, Certificates under the hands of Andrew Stewart & J. Gordon Gray, and ~~Andrew Stewart & J. Wilson~~, being two Medical Persons duly qualified in terms of an Act, entituled "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) David Denard, 52 Queensberry Street, Dumfries (a pauper) and that the said David Denard 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 David Denard as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise the Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said David Denard which accompanied the said Petition.

(1) Insert Name and Designation.

(2) Describe him, and if a Pauper, so.

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

DATED this Seventh day of July, One thousand nine hundred and five years.

Three words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo: Lawson

No. 9421

Name, David Denard.
(Drufo)

Date of Admission, 6 July 1905.

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 Renfrew and Bute *and his Substitutes,—*

The Petition of Alexander Ross Thomson Inspector of Poor, Parish of Rothesay

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Grahame Geddes Dowie

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

your Petitioner's (3) Charge 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 Grahame Geddes Dowie to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) A. Ross Thomson Inspector

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

DATED this Seventh (4) day of July 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,	Grahame Geddes Dowie
2. Sex and Age,	Male 63 years
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Bank Clerk
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	4 Mount Pleasant Road
7. Place where Found and Examined,	4 Mount Pleasant Road
8. Length of time Insane,	2 weeks
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	63 years
11. When and where previously under Examination and Treatment (5),	Never under treatment before
12. Duration of Existing Attack,	2 weeks
13. Supposed Cause,	Adverse Circumstances
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,	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 his Family known to be or to have been Insane,	Robert O. Urquhart 47 India St Edinburgh None known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None known

(5) If patient has previously been an Asylum, state the latest date thereof. If not previously under Examination and Treatment state the fact.

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

DATED this Seventh day of July One thousand nine hundred and five

(*To be signed by the party applying*) A. Ross Thomson Insp.

T. & C.—June 1903.

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 Burnett Lawson 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) 11 Mount Pleasant Rd, Rothesay in the County of Bute separately from any other Medical Practitioner visited and personally examined (4) Graham Geddes Dowie Bank Clerk, 11 Mount Pleasant Road and that the said Graham Geddes Dowie is a (5) Lunatic of unsound 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 looks worried and Exiled. He says he is done for and there is no hope for him. He believes he is going to be seized by the police. He thinks people are looking for him and talking about him.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mary Ann McDonald 11 Mount Pleasant Rd. Rothesay states that he has become quite changed in manner stopped reading his books and papers and yesterday about 4 o'clock last night he walked out and seemed to be watching people were coming for him.

Name and Medical Designation, Burnett Lawson

Place of Abode, Battery Pl, Rothesay

DATED this Sixth day of July One thousand nine hundred and five 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 Nairn Marshall being a (1) Doctor of Medicine Univ. Glasg. 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 Mount Pleasant Road, Rothesay, Bute, in the County of separately from any other Medical Practitioner visited and personally examined (4) Graham Geddes Dowie and that the said Graham Geddes Dowie is a (5) Lunatic of unsound 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 patient is preoccupied & restless. He says he is unable to do anything because he feels his brain in confusion. He has a dread upon him that the police are looking for him & for that reason he went to the door but will be glad to be here at night.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His landlady Mary Ann McDonald states that within the last few weeks a marked change has taken place in his manner & his habits. He no longer reads but sits up & down wringing his hands & saying that something is to happen.

Name and Medical Designation, John Nairn Marshall M.D.

Place of Abode, 7 Battery Pl. Rothesay

DATED this Sixth day of July 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,
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 Lyndsay Stuart Esquire (1) Sheriff Substitute
of the (2) Sheriffdom of Renfrew & Bute
having had produced to me, with a Petition at the instance of (3) Alexander Ross Thomson, Inspector of Poor, Rothesay
Certificates under the hands of James Burnett Lawson, M.D. Rothesay
and John Navin Marshall, M.D., Rothesay 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)
Grahame Geddes Dowie 4 Mountpleasant Rd Rothesay and that the said
Grahame Geddes Dowie 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 Grahame Geddes Dowie as a Patient into the (6) Crichton Royal ~~Asylum of~~ 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 Grahame Geddes Dowie which accompanied the said Petition.

DATED [at Rothesay] this Seventh day of July One thousand nine hundred and five.

To the Superintendent of the (7)
~~Asylum of~~
Crichton Royal Institution
Dumfries

[Signature] John Lyndsay Stuart S.S.

(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. 9422.

Graham Geddes Dowie.

Adm: 8 July 1905.

N.B.—*This form shall remain in the keeping of the Superintendent of the Asylum till 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'Ewan~~ James Brown Gibson, Inspector of Poor for the Parish of ~~Dumfries~~ Kirkconnel:

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that John Monteith, afsr. designed, 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 monteith, to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) James Brown Gibson

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

DATED this Fifteenth (*) day of July, —— 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,	John Monteith
2. Sex and age,	Male - 23 -
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous occupation (if any),	Labourer, then grocer, & then in mariners.
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	Bridgend, Kirkconnel.
7. Place where found and examined,	Brought from Dumfries in custody charged with assault & found insane there. Placed at the Crichton Royal Institution.
8. Length of time Insane,	23.
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,	Two Days.
13. Supposed Cause,	Ill Health
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,	Kirkconnel, Dumfriesshire.
18. Date of becoming Chargeable,	15th July, 1905.
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,	Robert Monteith, Son. Grandfather. Retired Miner Not Known Kirkconnel.
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 15th —— day of July, —— One thousand nine hundred and five.

(To be signed by the party applying) James Brown Gibson

MEDICAL CERTIFICATE, No. 1.

I, the undersigned, Joseph Hunter, ——

being a (1) Bachelor of Medicine and Surg

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) John Monteith, pauper, of Sidpend Kirkconnel, Kirkcudbright, and that the said John Monteith — is a (5) person of unsound 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) While under my care he has shown very marked mental excitability, being roused to a state of passion at the mention of the persons against whom he bears resentment. He has repeatedly declared that he will take the life of Mr Stenhouse, Crichton Royal, Dumfries, & that he became very violent & shouted and had a struggle with an attendant on Sunday the 14th inst. when he was prevented from carrying out his threat.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Governor of Dumfries Prison informs me that he broke the windows of his cell here with stones and gave as his reason that he was a bit of a spook. The warders at Dumfries Prison have also reported that he has been violent & threatening.

Name of Medical Designation, } Joseph Hunter

Place of Abode, 31 Castle St Dumfries

DATED this fifteenth day of July, — One thousand nine hundred and five.

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

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

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

(4) *Insert 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 Ferguson, ——

being a (1) Bachelor of Medicine of Edinburgh 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) Crichton Royal Institution, Dumfries, ——— in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Monteith, of Sidpend Kirkconnel, pauper, — and that the said John Monteith, is a (5) person of unsound 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 & behaviour
His variable moods — Suddenly becomes very excited & noisy —
His absurd & incongruent talk.

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

Name of Medical Designation, } Thomas Ferguson M.B.

Place of Abode, 16 Castle St Dumfries

DATED this fifteenth day of July, — One thousand nine hundred and five. —

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

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

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

(4) *Insert 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 authorises the detention of a Patient in an Asylum for a period not exceeding three days without an order by the Sheriff.)

I, the undersigned, Joseph Hunter
being (1) Ch.B. Bachelor of Medicine and Surgery
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 Monteith, 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.

(1) State Medical qualification.
(2) State place of Examination.

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

Joseph Hunter

DATED this fifteenth day of July 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 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, Charles Arthur Gordon Sheriff-Substitute
of the County of Dumfries
having had produced to me with a Petition at the instance of (1) James Brown, Crichton Royal Institution
Certificates under the hands of Joseph Hunter and
and Thomas Ferguson, being two Medical Persons duly qualified in terms of an Act, entituled "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) John Monteith, Bridgend, Kirkconnel, (a Pauper)
and that the said John Monteith 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 Monteith as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise the Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said John Monteith which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, and if a Pauper, so.
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

DATED this Seventeenth day of July One thousand nine hundred and five years.

C. Arthur Gordon

To the Superintendent of the Public Crichton Royal Institution for Lunatics, at Dumfries.

No. 9433.

Name, John Monteith
(Kirkconnel)

Date of Admission, 14 July 1905.

S H E R I F F C O U R T, D U M F R I E S.

Certified Copy Deliverance,

——— pronounced by ———

The Sheriff-Substitute of Dumfries and Galloway, at Dumfries.

——— upon a Petition by ———

Charles Steuart Phyn, Procurator- Fiscal of Court, at Dumfries, for the Public Interest,

——— for ———

Committal of John Monteith, Labourer, presently in custody at the County Buildings, Dumfries, to the Crichton Royal Institution, Dumfries, as a dangerous lunatic, in terms of Sec. 15 of "the Lunacy (Scotland) Act 1862."

Dumfries, 14th July, 1905. The Sheriff Substitute having considered the foregoing Petition, with the Medical Certificates produced, grants warrant to commit John Monteith, named in the Petition, to the Crichton Royal Institution for Lunatics, at Dumfries, as a place of safe custody ad interim.

X X X X.-

(Signed) C. Carthew Yorstoun.

A true Copy,

Certified by me,

Charles McKie

Pro. Clk.

Dumfries,
14th July, 1905.

(To be signed by the party applying)

T. & C.—May 1905.

P. p.

(To be signed by the party applying)

P. p.

T. & C.—May 1905.

No. 9423.

John Monteith

Adam: 11th July 1905.

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 Rish, Westpark, Kilmaurs.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Rish, your Petitioner's (3) adopted 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 Rish, —— 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 Rish

(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 July, — One thousand nine hundred and five 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 Rish.
2. Sex and Age,	24 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,	~~Dumfries Asylum~~ Marsden Hall - Nelson, Dumfries.
7. Place where Found and Examined,	~~Dumfries~~
8. Length of time Insane,	Intermittently for 8 years.
9. Whether First Attack,	Do.
10. Age (if known) on First Attack,	26.
11. When and where previously under Examination and Treatment (5)	Asylum, Marsden Hall Nelson.
12. Duration of Existing Attack,	14 months.
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	Do.
15. Whether Suicidal,	Do.
16. Whether Dangerous to others,	No.
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,	Not Known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has previously been an Asylum, state the date of last 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 July, — One thousand nine hundred and five years.

(To be signed by the party applying) John Rish

P. p.

T. & A. C.—May 1905.

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 Member 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) Isabella Risk, Spinster, Marsden Hall, Nelson, near Blackburn, and that the said Isabella Risk, is a (5) person of unsound 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 incoherent in speech & goes on talking and muttering to herself. She has difficulty in answering questions. She is confused & stupid.

(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 Fifteenth day of July, One thousand nine hundred and five 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, Frederick Hugh Clarke, being a (1) Bachelor of Medicine and Master in Surgery 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) The Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Isabella Risk, Spinster, Marsden Hall, Nelson, near Blackburn, and that the said Isabella Risk, is a (5) person of unsound 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 & appearance are those of an insane person. She contradicts her statements within a few minutes is erratic, disjointed, and purposeless in her conversation. She fails to answer intelligent questions. Given to

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

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

Name and Medical Designation, Frederick Hugh Clarke M.B.

Place of Abode, Charlotte Street. Dumfries.

DATED this ~~Fifteenth~~ Seventeenth day of July, One thousand nine 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.)

, the undersigned, Peter Murray Kerr,
oing (1) Graduate Physician,
ereby certify, on soul and conscience, that I have this day, at (2) Islands Hall
the County of Dumfries, seen and personally examined
Isabella Risk, , and that the said
rson is of unsound mind, is a proper Patient to be placed in an Asylum, and is in a fficiently good state of bodily health at this date to be removed to the Asylum
(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 Fifteenth day of July, One thousand
ne hundred and Five years.

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

hereby request the Superintendent of the Crichton Royal
ylum to receive therein Isabella Risk,
whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Agent for Petitioner

Signature and Address John Rutherford Kilmarnock.

Date 15th July 1905.

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

I Charles Matthew Thorstorn (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 Risk,
Meattock, Kilmarnock,
Certificates under the hands of Peter Murray Kerr,
and Frederick Haughton 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) Isabella Risk, Married, Female, Domestic Servant, Parish of Kilmaurs, (Parish of Kilmaurs) and that the said Isabella Risk, 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 Risk as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize (7) Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Risk 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.
(7) His, or her.

DATED [at Dumfries,] this Eighteenth day of July,
One thousand nine hundred and Five years.

C. Matthew Thorstorn

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

[Signature]

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

No. 9424.

Isabella Risk.

Adm: 15 July 1905.

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) County of Ayr *and his Substitutes,—*

The Petition of John Rankine Drover & Sanquhar Kirkbride Estate Parish of Kirkmichael Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann Baldrett or Rankine 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 Ann Baldrett or Rankine 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 Rankine

DATED this Thirtieth (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,	Mary Ann Baldrett or Rankine
2. Sex and Age,	Female aged 64
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,	Rigg Crosshill
7. Place where Found and Examined,	Rigg Crosshill
8. Length of time Insane,	nearly four weeks
9. Whether First Attack,	First attack
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (1)	Never before under treatment
12. Duration of Existing Attack,	nearly four weeks
13. Supposed Cause,	Imaginary illness
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,	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,	John Rankine Rigg Crosshill husband. None of Family known to have been insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	No

(1) If patient has previously been under an Asylum, state the name and date of last Asylum or Hospital on or at which he was last under treatment thereto. If previously under Examination or Treatment, state facts.

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

DATED this Thirtieth day of July One thousand nine hundred and five

(To be signed by the party applying) John Rankine

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 Govan

being a (1) Faculty of Medicine and Master of Surgery 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) Regt. Road Kirkmichael, Ayr in the County of

separately from any other Medical Practitioner

visited and personally examined (4) Mrs Rankine, Regt. Road of Kirkmichael, Ayr and the

the said Mrs Rankine 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)

I stitched up her neck after an attempt she made commit suicide and at times she talks in an excited and wandering manner

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

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

Nurse McVean Brookhill, told me that during the day (Mrs Rankine) jumped out of bed, and tried to out the door to get a knife or a gun to

Name and Medical Designation, Hugh Govan M.B.

Place of Abode, Maybole

DATED this thirteenth day of July One thousand nine hundred and five 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, Robert Govan,

being a (1) L. R. C. S. Ed.

and being in actual practice as a (2) Surgeon

do hereby certify, on soul and conscience, that I have this day, at (3) Regt. Road Parish of Kirkmichael Ayr in the County of

separately from any other Medical Practitioner

visited and personally examined (4) Mrs Rankine, Regt. Road Parish of Kirkmichael Ayr and the

the said Mrs Rankine 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)

The said to me she wanted this to commit suicide and had attempted to cut her throat being cut from ear to ear.

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

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

Her husband and daughter are afraid to leave her, and says she was using the use of the knife

Name and Medical Designation, Robert Govan

Place of Abode, Maybole

DATED this Thirteenth day of July 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, Robert Girvan being (1) L.R.C.S.Ed hereby certify, on soul and conscience, that I have this day, at (2) Ayr in the County of Parish of Kirkmichael Ayr, Mrs Rankine, 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

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 Girvan

DATED this Thirteenth day of July 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

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 Campbell Hairs Esq (1) Advocate Sheriff Substitute of the (2) County of Ayr having had produced to me, with a Petition at the instance of (3) John Rankine Overseer & Gamekeeper Kirkbride Estate Kirkmichael Certificates under the hands of Hugh Girvan M.D. and Robert Girvan L.R.C.S.Ed 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 Ann Naldrett or Rankine (Quoad) and that the said Mary Ann Naldrett or Rankine 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 Ann Naldrett or Rankine as a patient into the (Criehton Royal Asylum & Institution Dumfries and I authorize you for Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann Naldrett or Rankine 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 Fourteenth day of July One thousand nine hundred and five years

To the Superintendent of the (7)
Royal Asylum & Institution
Dumfries [Signature] J. Shirra

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

No. 9425.

Mary Ann Maldrett or Rankine

Adm: 15 July 1905.

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 Gilbert Dickson Baillie Inspector of Poor Stranraer

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Gallacher 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 William Gallacher 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*) Geo. D. Baillie

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

Dated this 17th (4) day of July 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,	William Gallacher
2. Sex and Age,	Male 39 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Prot
6. Previous Place of Abode,	6 Rose St. Stranraer
7. Place where Found and Examined,	do do
8. Length of time Insane,	Maintainment now
9. Whether first Attack,	to
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment (5)	
12. Duration of existing Attack,	Maintainment
13. Supposed Cause,	Fits
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	No
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Leswalt but now sent from 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,	wife Mrs Wm Gallacher 6 Rose St Stranraer
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has previously been an inmate of an Asylum, state name and date of last admission or attempted admission 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 17th day of July One thousand nine hundred and five

(*To be signed by the Party applying*) Geo. D. Baillie

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, Andrew Bluelie
being a (1) Bachelor of Medicine of Glasgow Un
and being in actual practice as a (2) Physician & Surge
do hereby certify, on soul and conscience, that I have this day, at (3) 6 Ro
Strawraer
Wigtown in the County
separately from any other Medical Practitioner
visited and personally examined (4) William Gallac
James Rose Strawraer
William Gallacher and that
unsound mind is a (5) 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 being called to see him I found
he had an open knife in my hand & w
him who would attempt to take it
by his threats. Latter part of
he did not appear deaf by understanding
questions asked him. He is epileptic.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife informs me that he gets up during
night & walks in an unconscious state
home. That a drug on which he takes
says that he talks incoherently & that
appears to live with him by reason of
mind he considers himself

Name and Medical Designation, Andw Bluelie M

Place of Abode, 45 Gregget St

Dated this fifteenth day of July 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, 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) 6 Rose St
Strawraer
Wigtown in the County
separately from any other Medical Practitioner
visited and personally examined (4) William Gallacher,
pauper 6 Rose Street, Strawraer, and that
the said William Gallacher is a (5) person
of unsound 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. He is restless and suspicious in manner.
2. He is abstracted in thought.
3. He is only partly conscious of the nature of his surroundings and is incapable of any mental effort.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his wife
Susan Allison, ~~the woman with whom he cohabits~~
informs me that (1.) He does not sleep. (2) He wanders about
the house unconsciously and (3) He is so violent at times that she
is afraid for her own safety.

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

Place of Abode, Strawraer

Dated this fifteenth day of July One thousand
nine 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,
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) Sheriff-dom of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) George Dickson
Baillie Inspector of Poor Stranraer
Certificates under the hands of Andrew Chuttie M.B. C.M.
and John Alexander Anderson 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 (4)
William Gallacher, pauper and that the said
William Gallacher 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 Gallacher as a patient into the Crichton Royal ~~Asylum of~~ 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 William Gallacher which accompanied the said Petition.

DATED [at Stranraer] this seventeenth day of July one thousand nine hundred and five Years

To the Superintendent of the (6)
Royal ~~(Asylum)~~ of Dumfries
Superintendent (Three words delete)

[*Signature*] John Cameron

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

No. 94&96.

William Gallacher.

(Hamsah)

Adm: 14 July 1905.

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) County of Dumfries. *Stewartry and his Substitutes* at Dumfries.

The Petition of James Menzies Austin Inspector of Poor for the Parish of Parr, Dalbeattie.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that William Davidson,

(3) State degree of ~~your Petitioner's~~ (3) relationship or other capacity in which Petitioner stands to Lunatic.

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 Davidson, to the Crichton Royal Institution, Dumfries, and to sanction his admission into the said Asylum

(To be signed by the Party applying) p. J. M. Austin A. M. Halliday acting Inspector.

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

DATED this Eighteenth (4) day of July, One thousand nine hundred and five.

STATEMENT.

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

(5) If patient has previously been an Asylum, state all date of last admission or approximate thereto. If previously under Examination or Treatment state fact.

1. Christian Name and Surname of Patient at length,	William Davidson.
2. Sex and Age,	Male. - 23 Years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	gardener.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Wigtownshire - Parish Kirkcolm, Dalbeattie.
7. Place where Found and Examined,	Dalbeattie.
8. Length of time Insane,	Weak intellect since childhood.
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	when about five years old.
11. When and where previously under Examination and Treatment (5)	~~never previously under treatment.~~
12. Duration of Existing Attack,	~~about 18 years sometimes longer.~~ see No 8.
13. Supposed Cause,	-
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,	The 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,	Jessie Martin or Davidson, 140 South-west Row, Dalbeattie - Mother. 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 Eighteenth day of July, One thousand nine hundred and five.

(To be signed by the party applying) J. M. Austin

P.P. A. M. Halliday acting Inspector.

T. 8. C.—Oct. 1898.

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 Archibald David Gillespie, ——
being a (1) Bachelor of Medicine & Master in Surgery 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) 140 Southwood
—— Dalbeattie, ——
Kirkcudbright, —— in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Davidson, ——
and that
the said William 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
muttering & incoherent in speech. Wont rest in bed
and struggles with attendants. Takes times of
delirium. Has been mentally affected
since childhood. Quite uneducated.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
(Mother) has to bite all those about him
won't sleep or lie in bed. Won't eat. Has
tried to get out, and has wounded several
times in running over a field in front of his
with a stick making for a deep pool in the stream

Name and Medical Designation, D. A. D. Gillespie
M.B. Edin.

Place of Abode, Dalbeattie

DATED this eighteenth day of July, — One thousand eight 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, Alfred William Anderson,
being a (1) Bachelor of Medicine & Master in Surgery 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) 140 Southwood
—— Dalbeattie ——
Kirkcudbright, —— in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Davidson, ——
and that
the said William Davidson —— 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)
Has been under my observation for years, unable to take
care of himself & mentally undeveloped. At present
he has developed periods of impulsiveness &
becomes dangerous to others - biting & seizing
any one near at hand. He has never received
any school education & cannot converse.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His mother says she is now afraid for her
has bitten & struck at her & she is quite unable
to look after him when these attacks
comes on - which are frequent every day

Name and Medical Designation, Alf Anderson

Place of Abode Dalbeattie

DATED this Eighteenth day of July, — One thousand eight 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, Dunt and D. Gillespie, being (1) Builder of Medicine & Mant (Univ. Edin.) hereby certify, on soul and conscience, that I have this day, at (2) 140 Southwick Rd Dalbeattie in the County of Kirkcudbright, seen and personally examined William Davidson, 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. A. D. Gillespie

DATED this eighteenth day of July, — One thousand ~~eight~~ 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 ~~Dumfries~~ Asylum to receive therein William Davidson, Crichton Royal Institution, 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. McAuslin, Inspector of Poor. A. M. Halliday, Assistant Inspector of Poor.

Date 18th July 1905.

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

I, ~~Charles Gattas~~ Gordon Thomas Sheriff-Substitute of ~~the~~ (1) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) James Maxwell Austin, Inspector of Poor, Poor, Dalbeattie, Certificates under the hands of Samuel Archibald Dunt Gillespie &c, and Alfred William Anderson, 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 Davidson, 140 Southwick Road, Dalbeattie, (Labourer) — and that the said William Davidson is a (4) Person of unsound mind, an insane person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Davidson 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 William 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.

(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 Nineteenth day of July One thousand ~~eight hundred and~~ nine hundred and five years. [Interpolated words deleted].

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

[Signature] Gordon Thomas Sheriff-Substitute

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

No. 9429.

William Davidson.

(Mr)

Adm: 18 July 1905.

~~Glasgow Royal Asylum, Gartnavel.~~ Crichton Asylum, Dumfries

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 Kerr, Joiner, residing at Mennock Bridge, Sanquhar, —

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Annabella Gemmill or Kerr, — your Petitioner's (3) Wife, — residing at Springbank, 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 Annabella Gemmill or Kerr, — to the ~~Glasgow Royal Asylum at Gartnavel~~ 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 Kerr.

(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 July, — One thousand nine hundred and five 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,	Annabella Gemmill or Kerr.
2. Sex and Age,	Female, 50.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Wife. - School-Teacher.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Ardoith Cottage, Mennock, Sanquhar.
7. Place where Found and Examined,	Springbank, Kirkintilloch.
8. Length of time Insane,	Three months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	50.
11. When and where previously under Examination and Treatment (5),	—
12. Duration of Existing Attack,	About Six months.
13. Supposed Cause,	Menopause & Debility.
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 Kerr, Ardoith Mennock Sanquhar. - Husband.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If Patient has been previously in Establishment, state fact, and date of last admission 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 Twenty-fourth day of July, — One thousand nine hundred and five years.

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

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Mclaister,
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) Springbank Institution, Stirling,
in the County of Stirling,
separately from any other Medical Practitioner, visited and personally examined (4) Annabella Gemmell or Kerr,
and that the said Annabella Gemmell or 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.:—

1. Facts indicating Insanity observed by myself: (6)
She is melancholic, sits and mourns at intervals. Begins to moan and wring her hands in the middle of a conversation.
She suffers from delusions of a worrying character; that she suffers from cancer; that she is unworthy of her husband, and is unfit to live. She states she wants to be dead.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Miss Wonder, Springbank Institution - with whom Mrs Kerr has been residing for the past six months informs me that Mrs Kerr left the house during the night, and was found in the River Kelvin, which passes close to Springbank House.

Name and Medical Designation, John Mclaister M.D.
Place of Abode, 3 Newton Place, Glasgow.
Dated this Twenty-fourth day of July, — One thousand nine hundred and five 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, George Cunningham,
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) Crichton Royal Institution, Dumfries,
in the County of Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Annabella Gemmell or Kerr, Crichton Royal Institution,
and that the said Annabella Gemmell or 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.:—

1. Facts indicating Insanity observed by myself: (6)
Her insane manner and appearance. Her emotional manner, bursting into tears, & the next minute laughing. She tells me she isn't good enough to live, and is a constant worry to her friends.

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

Name and Medical Designation, George Cunningham M.D.
Place of Abode, 47 Castle Street Dumfries
Dated this Twenty fourth day of July, — One thousand nine hundred and five 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, John Alexander,
being (1) a Doctor of Medicine,
hereby certify, on soul and conscience, that I have this day, at (2) Springbank, Kirkintilloch
in the County of Stirling, seen and personally examined Annabella Gemmill or Kerr, , 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 Alexander

Dated this Twenty-fourth day of July, One thousand nine hundred and five 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 ~~Glasgow Royal Asylum~~ Crichton Asylum Dumfries to receive therein Annabella Gemmill or Kerr, to whom the foregoing Certificate of Emergency refers.

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

Signature, John Kerr

Address, Mennock Bridge Sanquhar

Date, 24th July, 1905

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

I, ~~Charles Arthur Ogston~~ (1) Hon. Sheriff-Substitute, of the ~~County~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) John Kerr, farmer, Mennock Bridge Sanquhar, Certificates under the hands of John Alexander, 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) Annabella Gemmill or Kerr, Springbank, Kirkintilloch, (Petr's Wife) and that the said Annabella Gemmill or Kerr, 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 Annabella Gemmill or Kerr as a Patient into the ~~Glasgow Royal Asylum at Gartnavel~~ Crichton Asylum 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 Annabella Gemmill or Kerr 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.

Dated [at Dumfries] this Twenty-sixth day of July One thousand nine hundred and five years. This printed word deleted.

To the Superintendent of the Public ~~Glasgow Royal~~ Asylum of Crichton Royal Institution Dumfries.

[Signature] C. Arthur Ogston

No. 9428.

Annabella Kennedy or Starr.

Adm: 2nd July 1905.

—This Form shall be in keeping of the Clerk of the Asylum to be one of the Sheriff Court.

[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 Walter Walshaw Hutchinson 10 Pontefract Road Barnsley

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that John Hutchinson

State cross of relationship, or other capacity in which he stands to Lunatic.

your Petitioner's (1) 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 authorise the transmission of the said John Hutchinson to the Crichton Royal Institution at Dumfries, and and to Sanction his admission into the said Institution.

(To be signed by the Party applying) Walter W. Hutchinson

The date of the Petition is within fourteen clear days of the dates of the Medical Certificate.

DATED this First — (2) day of August One thousand eight hundred and five 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,	John Hutchinson
Sex and Age,	Male: 53 years
Married, Single, or Widowed,	single
Condition of Life, and previous Occupation (if any),	Gas Engineer & Master Plumber
Religious persuasion, so far as known,	Wesleyan
Previous Place of Abode,	2 ~~Cremorne~~ Terrace Sackville St. Barnsley
Place where Found and Examined,	Isle of Man Asylum.
Length of Time Insane,	Fifteen days
Whether First Attack,	yes
Age (if known) on First Attack,	53 years
When and where previously under Examination and Treatment. (Name of Establishment into which last received, and Year of reception of approximation thereto,	Is under treatment in Isle of Man Asylum
Duration of Existing Attack,	7 weeks
Supposed Cause,	alcoholism & effect of excessive heat on June 22nd
Whether subject to Epilepsy,	no
Whether Suicidal,	has threatened
Whether dangerous to others,	yes
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,	Walter Walshaw Hutchinson Gas Engineer 10 Pontefract Road Barnsley
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 July — One thousand eight hundred and five years.

(To be signed by party applying) Walter W. Hutchinson

MEDICAL CERTIFICATE No. I.

I, the undersigned William Richardson 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) the Lunatic Asylum in the ~~County~~ of the City of Man separately from any other Medical Practitioner, visited and personally examined (4) John Hutchinson of Greenwood Terrace Sackville St. Barnsley and that the said John Hutchinson is a (5) person of unsound 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.*

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) he tells me that he has an income of "ten or twelve thousand a year" that he has served in the 17th Lancers and has "14 medals and 19 bars" that in leaving West Kirby, Liverpool he "laid out" "the attendants breaking 7 jaws and 14 ribs" These statements are all delusions.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother Mr. Walter W. Hutchinson gave me a telegram in which Mr. John Hutchinson telegraphed for a (dog) license in order to enable him to marry

Name and Medical Designation, W^m Richardson. M.D.
Place of abode, Lunatic Asylum, Braddan, I.M.

DATED this thirtieth day of July — One thousand nine hundred and five years.

MEDICAL CERTIFICATE No. II.

I, the undersigned George Robert Livingston ~~William Richardson~~ being a (1) Doctor of Medicine 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) Crichton Royal Institution, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Hutchinson Crichton Royal Institution Dumfries and that the said John Hutchinson is a (5) person of unsound 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.*

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
His insane manner & appearance
He tells me he has bought up various hotels in Great Britain. One he has bought for £8000 & sold already for £20,000. This statement is a delusion.

(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 M.D.
Place of abode, 47 Castle Street Dumfries

DATED this first — day of August — One thousand nine 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 William Richardson being (1) a Doctor of Medicine of the Edinburgh University (1) State Medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) the Lunatic Asylum (2) State place of examination.
in the Isle of Man, seen and personally examined John Hutchinson, 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.

W. Richardson M.D. L.R.C.P.

DATED, this thirtieth day of July One thousand ~~eight~~ nine hundred and five 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 Hutchinson to whom the foregoing certificate of emergency refers.

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

Signature and Address, Walter W. Hutchinson

Date, 31st July 1905.

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

I, Charles Arthur Gordon Esquire, Advocate, 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) Walter Baldwin Hutchinson, 10 Portchester Road, Bromley certificates under the hands of William Richardson, 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 (2) John Hutchinson, The Lunatic Asylum, Isle of Man (Petitioner's Brother) and that the said John Hutchinson 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 John Hutchinson 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 John Hutchinson, 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 first day of August One thousand ~~eight~~ nine hundred and five years. Five printed words deleted.

C. Arthur Gordon

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9429.

Name, John Hutchinson.

Date of Admission, 31st July 1905.

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 Gerald Henson

The Hermitage. Clewer. Windsor. Berks. —

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Geraldine Heason —

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 Geraldine Henson — to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Gerald Henson

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

DATED this First — (4) day of August — One thousand nine hundred and five 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,	Geraldine Henson.
2. Sex and Age,	Female. 32 years on 14 April 1905
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,	23 Hampton Park. Redland. Bristol
7. Place where Found and Examined,	Winterbourne. and Dumfries.
8. Length of time Insane,	Uncertain. Certified at Bristol on
9. Whether First Attack,	18th July 1905.
10. Age (if known) on First Attack,	not known with accuracy. but she has been of weak intellect for many years
11. When and where previously under Examination and Treatment (5)	No - where -
12. Duration of Existing Attack,	Since 18 July 1905
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,	None - she is not a Pauper 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,	Gerald Henson - The Hermitage. Clewer - Green. Windsor. Berks. Father of the Patient. No member of the Family known to be or has been Insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has previously been an Asylum Patient, state name and date of latest admission or Asylum there. 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 Thirty first day of July — One thousand nine hundred and five years.

(To be signed by the party applying) Gerald Henson

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, ~~Gerldine Hs~~ Wilson Lagon being a (1) Member of the Royal College of Surgeons of London Licentiate of the Royal College of Physicians of E. and being in actual practice as a (2) a Physician do hereby certify, on soul and conscience, that I have this day, at (3) Dorchester House Bankbourne Gloucester in the County of separately from any other Medical Practitioner visited and personally examined (4) Geraldine Henson and the said Geraldine Henson is a (5) 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has to be attended to like a child cannot answer the simplest question & is very faulty in her habits and at times inclined to be violent

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) the porteress Nurse Dodgen states that cannot do anything for herself or answer any thing she is told to do and she is very faulty in her habits & tricks to her

Name and Medical Designation, Wilson Lagon M.R.C.S. &c

Place of Abode Dorchester House Bankbourne

DATED this 27th day of July 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, George Pringle Knight being a (1) Doctor of medicine 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) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Geraldine Henson Crichton Royal Institution Dumfries and the said Geraldine Henson is a (5) Person of unsound 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 manner and appearance
Her rambling incoherent conversation
answering every question by "She has been very unkind"

(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 P. Knight M.D.

Place of Abode, 4 Carlton Street Edinburgh

DATED this first day of August One thousand nine 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, Wilson Eager being (1) a Member of the Royal College of Surgeons & Licentiate of the Royal College of Physicians hereby certify, on soul and conscience, that I have this day, at (2) Rockwood in the County of Dumfries, seen and personally examined Geraldine Henson, 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.

Wilson Eager

DATED this 27th day of July 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 Dumfries Asylum to receive therein Geraldine Henson. to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Gerald Henson. The Hermitage. Clewer. Windsor. Berks.

Date 31st July 1905.

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

I, Charles Arthur Gordon Cosmie, 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) Gerald Henson The Hermitage, Clewer, Windsor, Berks, Certificates under the hands of Wilson Eager, 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) Geraldine Henson, 23 Hampton Park, Redland, Bristol, (Private Daughter) and that the said Geraldine Henson 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 Geraldine Henson as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize (7) Order Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Geraldine Henson 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.
(7) His, or her.

DATED [at Dumfries] this First day of August, one thousand nine hundred and five years.

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

[*Signature*] C. Arthur Gordon Cosmie

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

No. 9430.

Geraldine Henson.

Adm: 31 July 1905.

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 William McEwan 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 McEwan to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Institution.

(To be signed by the Party applying) (sd.) Miles McInnes

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

Dated this First (*) day of August One thousand nine hundred and five 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 McEwan
2. Sex and age,	male - 46
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	38 English street Dumfries
7. Place where found and examined,	38 English street Dumfries
8. Length of time Insane,	a few weeks
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	46.-
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	nowhere
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,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	31st July 1905
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 G. McKenzie McEwan, (wife) 38 English St Dumfries not 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 Thirty first — day of July — One thousand nine hundred and Five years.-

(To be signed by the party applying) (sd.) Miles McInnes

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, James Smith Gray
being a (1) Graduate in Medicine and Surgery of the University of Aberdeen
and being in actual practice as a (2) General Practitioner
do hereby certify, on Soul and Conscience, that I have this day, at (3) 38 English Street, Dumfries
in the County of Dumfries-shire separately from any other Medical practitioner, visited and personally examined (4) William Mc Gowan, pauper
and that the said William McGowan is a (5) person of unsound 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 manner, and appearance
Breaks down and cries on the slightest provocation
Says his arm is powerless. Says he cannot sleep
at nights

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

2. Other facts (if any) indicating Insanity communicated to me by others : (7)
His wife Mary McGowan tells me he gets maniacal
fits, and threatens to kill them all. Has on several occ
broken the furniture, and he has the fondest love
towards her

Name of Medical Designation, } James Smith Gray

Place of Abode, 20 Castle Street, Dumfries

Dated this thirty first day of July One thousand nine hundred and five 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 Ingram Ingram
being a (1) Bachelor 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) 38 English St
Dumfries
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) William Mc Gowan pauper
and that the said William Mc Gowan is a (5) person of unsound 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 violent in my shouting & using vile language
throwing things about & destroying furniture — asks for
a drink & throws the water & food on the ground. Is
so suspicious of his best friends & calls every one bad
& opprobrious names —

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

2. Other facts (if any) indicating Insanity communicated to me by others : (7)
By his Wife Mary McGowan That she is in fear of her life as he has
threatened to "do" for her.

Name of Medical Designation, } Thomas Ingram MRT

Place of Abode, 16 Castle St Dumfries

Dated this thirty first day of July One thousand nine hundred and five years.

CERTIFICATE OF EMERGENCY.

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

I, the undersigned, James Smith Gray being (1) graduate of medicine and Surgery of the University of Aberdeen hereby certify, on Soul and Conscience, that I have this day, at (2) 38 English Street, Dumfries in the County of Dumfriesshire, seen and personally examined William McEwan, 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.

(1) State Medical qualification.
(2) State place of Examination.

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

James Smith Gray

DATED this thirtyfirst day of July One thousand nine hundred and five 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 William McEwan to whom the foregoing Certificate of Emergency refers.

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

Signature and Address, (x) Mile McInnes. 28 Queen St Dumfries.

Date, 31st July 1905.

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

I, Charles Arthur Thorburn, Esquire, Advocate, Aberdeen, Sheriff-Substitute of the 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 James Smith Gray, and Thomas Ferguson, being two Medical Persons duly qualified in terms of an Act, entituled "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) William McEwan, 38 English Street Dumfries, (a pauper) and that the said William McEwan 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 William McEwan as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise the Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said William McEwan 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 First day of August One thousand nine hundred and five years.

C. Arthur Thorburn

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 94831

Name, William McEwan.
(Dumfries)

Date of Admission, 31st July 1905.

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. Sheriffdom or Stewartry.

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

The Petition of William Mc Donald, Inspector of poor for the parish of New Abbey:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Milligan your Petitioner's (3) pauper patient, 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 Milligan, to the Crichton Royal Asylum, and to sanction his admission into the said Asylum.

(1) State degree of relationship or other circumstance in which Petitioner stands to Lunatic.

(To be signed by the Party applying) Wm Mc Donald

DATED this 30 (4) day of August, One thousand nine hundred and five 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,	Charles Milligan.
2. Sex and Age,	Male. 37.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	General Labourer.
5. Religious Persuasion, so far as known,	Roman Catholic.
6. Previous Place of Abode,	Colliedough, Kirkharrie, Newabbey, & at Dumfries.
7. Place where Found and Examined,	
8. Length of time Insane,	Nine years
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	28 years
11. When and where previously under Examination and Treatment (5)	Twice before an inmate of Crichton Royal Asylum.
12. Duration of Existing Attack,	Can't say.
13. Supposed Cause,	Can't say.
14. Whether subject to Epilepsy,	Can't say.
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	New Abbey.
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,	Ann Milligan Colliedough, Kirkharrie Newabbey (Mother.)
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None to Knowledge.

(5) State as nearly as may be the date of last admission or application. If previously under Asylum Treatment, state whether as Pauper or Private Patient, and if a Pauper, the Parish or Union chargeable. If any of the above particulars be not known, state the fact.

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

DATED this Third day of August One thousand nine hundred and five.

(To be signed by the party applying) Wm Mc Donald

T. & A. A.—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.*

I, the undersigned, Hugh Gillies
being a (1) Licentiate Royal Colleges 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) Colindoyle, Kirkcudbright, New Abbey, in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Charles Milligan, Pauper, and that the said Charles 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.:—

(6) *State the facts.*

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

Hallucinations & delusions.

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

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

Mrs Milligan
Says that he tries to take her life and is constantly fighting with unseen power down stairs.
Mr Charles says his hand trembles & voices in his head for years as described with.

Name and Medical Designation, Hugh Gillies L.R.C.P.S.Edin.

Place of Abode, New Abbey by Dumfries

DATED this Third day of August, 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, Charles Donaldson Law
being a (1) Licentiate of Royal College of Physicians and Royal College of Surgeons, 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) Charles Milligan, pauper of Collendoch, Kirkcudbright, and that the said Charles 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.:—

(6) *State the facts.*

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

I. He is the subject of mental depression.
II. He shows considerable mental infeeblement
III. He is rambling in his statements & conversation
IV He is delusional regarding his physical condition.

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

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

Mr William McDonald, Inspector of Poor, New Abbey, tells me that Charles Milligan behaves in a threatening way towards his mother

Name and Medical Designation, Charles D. Law
Med Supt

Place of Abode, Crichton R. I. Dumfries

DATED this Third day of August 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) Licentiate of Royal Colleges of Physicians & Surgeons, hereby certify, on soul and conscience, that I have this day, at (2) Collindough Nithsdale, in the County of Kirkcudbright, seen and personally examined Charles William 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) 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.

Hugh Gillies

DATED this Third day of August, 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 Asylum, Asylum to receive therein Charles Milligan to whom the foregoing Certificate of Emergency refers.

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

Signature and Address New Abbey

Date August 3d. 1905.

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

I, Charles Arthur Worstorn, 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) William Mc Donald, Inspector of Poor, New Abbey, Certificates under the hands of Hugh Gillies, and Charles Douglas Law 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 Milligan Collindough, Kirkbride (a pauper) and that the said Charles Milligan, 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 Milligan, 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 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 Dumfries.] this Fourth day of August, One thousand nine hundred and five Years

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

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

[*Signature*] Charles Arthur Worstorn

No. 9432.

Charles Milligan

Adm. 3rd Aug. 1905

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) Sheriffdom of Dumfries & Galloway *and his Substitutes.*—

The Petition of Alexander Meikle. Inspector of poor for the parish of Lesmahagow.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexina Heron 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 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 Meikle

(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 August 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,	Alexina Heron
2. Sex and Age,	Female. 54 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	None. Boarded Lunatic for 7 years.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Lunatic Ward Wigtown Poorhouse Stranraer.
7. Place where Found and Examined,	
8. Length of time Insane,	Congenital.
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution 26th November 1904 when she was sent to Stranraer
12. Duration of Existing Attack,	
13. Supposed Cause,	
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,	Lesmahagow.
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,	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 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 fifth day of August 1905 One thousand ~~eight~~ hundred and

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

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) The Wigtown Combination Poor House, Wigtown in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Alexina Heron, pauper and inmate of the said Institution 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 is lying in bed, crying and shouting and pushing away those who approach her, and requires two people to control her. (2) She is imbecile in appearance. (3) She is (generally) very violent, and threatening in appearance also.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Ormiston, matron of the said Poor House, informs me that the attached two of the inmates today, and attempted to choke one of these and that she (Mrs Ormiston) found a knife secreted her clothing today. Name and Medical Designation, John Alexander Anderson M.D.

Place of Abode, Stranraer

DATED this fifth day of August One thousand eight hundred and five 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, Andrew Blackie
being a (1) Bachelor of Medicine &c of 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) the Wigtown Combination Poorhouse Stranraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Eliane Heron, pauper & an inmate of the said Poorhouse and that the said Eliane 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)
She is very restless, constantly tossing in bed & unable to control herself. Her aspect is wild. Her manners in an unusual fashion. She requires careful watching to keep her in bed.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Ormiston informs me that she is very violent & that she has attacked another inmate attempting to strangle her & using other violence to her. Mrs Ormiston also says that Eliane the other inmates from sleeping by shouting crying &c & that she is very violent

Name and Medical Designation, Andrew Blackie M.B.

Place of Abode 45 George St Stranraer

DATED this fifth day of August One thousand eight 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,
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, } Inspector of Poor

Signature and Address Alex Meikle Inspector of Poor Holm Street Stranraer

Date

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

I, John Cameron Esquire Advocate (1) Sheriff Substitute of the (2) Sheriffdom of Dumfries & Galloway having had produced to me, with a Petition at the instance of (3) Alexander Meikle Inspector of Poor for the Parish of Leswalt Certificates under the hands of John Alexander Anderson M.D. and Andrew Clucas 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 (4) Alexina Heron pauper 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 (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 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 eighth day of August One thousand ~~eight~~ nine hundred and five years

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

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

[*Signature*] John Cameron

No. 9433.

Ardea Heron

(Seewalt)

Aden - 9 August 1905.

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 of Galloway and his Substitutes.—

The Petition of John Anderson, Auchorlee, Kirkcudbright

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Grace Charteris McKie or Anderson 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 Grace Charteris McKie or Anderson 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 Anderson

(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 August 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,	Grace Charteris McKie or Anderson
2. Sex and Age,	female 37
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. Previous Place of Abode,	Auchorlee, Kirkcudbright
7. Place where Found and Examined,	Auchorlee, Kirkcudbright
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 (3)	—
12. Duration of Existing Attack,	three days
13. Supposed Cause,	puerperal mania
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	probably
16. Whether Dangerous to others,	probably
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 Anderson, Auchorlee, Kirkcudbright, husband no
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

If patient has 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 eighth day of August One thousand nine hundred and five

(To be signed by the party applying) John Anderson

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Wm Johnstone being a (1) M.B. of Edin. University and being in actual practice as a (2) House of Peace Home do hereby certify, on soul and conscience, that I have this day, at (3) Anchorlee Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Grace Charlton McKie or Anderson and that the said Grace Charlton McKie or 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) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

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

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

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Suffers from great depression thinking she will injure or poison the child. Not able to answer Q.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Anderson states that yesterday she got out of the house secretly and away for Dirp home. coming back around

Name and Medical Designation, Wm Johnstone

Place of Abode, Kirkcudbright

DATED this 8th day of August One thousand nine hundred and five.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Wm Swanston Spence Reid being a (1) M.B: Ch: 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) Anchorlee Kirkcudbright Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Grace Charlton McKie or Anderson. and that the said Grace Charlton McKie (or 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) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

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

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

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Great depression following childbirth with delusions as to the bringing up of the baby saying she is killing it &c &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Told me by her husband and nurse. Left her home secretly yesterday & tried to go into a loch near here - staying away 6 hours. Shows great depression of spirits.

Name and Medical Designation, W.S.S. Reid. M.B: Ch:

Place of Abode, Derby Kirkcudbright

DATED this 8th day of August 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,
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, Elliot Frances Muir Esq^r (1) Sheriff Substitute
of ~~the~~ (2) Dumfries and Galloway at Kirkcudbright
having had produced to me, with a Petition at the instance of (3) John Anderson Anchorlea, Kirkcudbright
Certificates under the hands of William Johnstone, M.D.
and William Swanston Spence 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 (4)
Grace Charters McKie or Anderson and that the said
Grace Charters McKie or Anderson 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 Grace Charters McKie or Anderson as a Patient into the (5) Crichton ~~Asylum of~~ 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 Grace Charters McKie or 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 Kirkcudbright] this Eighth day of August
One thousand nine hundred and five.

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

[*Signature*] Elliot F. Muir

No. 9484.

Grace Charles McNeil
vs
Anderson
Adm. S. Aug. 1905

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 Julia Emma Gaussen Alexandra Park, Holywood, Belfast.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that William Lovett Gaussen

(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 Husband-William Lovett Gaussen to the Crichton Royal Institution, — and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Julia Emma Gaussen

(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 August, — One thousand nine hundred and Five 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 Lovell-Gaussen
2. Sex and Age,	Male. 47.
3. Married, Single, or Widowed,	Married.
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,	Holywood.
7. Place where Found and Examined,	62. Donegall St
8. Length of time Insane,	Nervous excitability-
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	47.
11. When and where previously under Examination and Treatment (5)	Never under previous examination & treatment:
12. Duration of Existing Attack,	Business troubles.
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,	Julia Emma Gaussen (wife) Alexandra Park— Holywood 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 the date of latest admission or approximate thereto. If patient was 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 ~~August~~ 10th day of August, One thousand nine hundred and Five Years.

(*To be signed by the party applying*) Julia Emma Gaussen

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Cahill
being a (1) Doctor of medicine of the Royal University of I
and being in actual practice as a (2) Physician
do hereby certify, on soul and conscience, that I have this day, at (3) 62 Donegal Street,
the Borough of Belfast, in the County
visited and personally examined (4) William Lovett Gaussen Commission Agent Alexandra Park, Holywood, Down, and the said William Lovett Gaussen, is a (5) person of unsound 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 immediately commenced, on my visiting him, to tell me how much a year he was making, viz. £700, which is above the true fact; he talked continuously; he altered some of his words & his eyes twitching & his lips & facial muscles; he assumed an air of extra well being, &

2. Other facts (if any) indicating Insanity communicated to me by others: (7) that he spent money recklessly & incurred expenses he should not have. Was unable to from Mrs Gaussen his wife, from Dr Gaussen, from his

Name and Medical Designation, William Cahill, M.
Place of Abode, 1 College Sq. North, Belfast

DATED this Seventh day of August One thousand nine hundred and four.

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

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

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

(4) *Insert 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 & 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) Antrim Asylum, Dunmurry in the County of
visited and personally examined (4) William Lovett Gaussen, Commission Agent Alexandra Park Holywood Down and the said William Lovett Gaussen, is a (5) person of unsound 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 believes himself to be very wealthy. Has an exaggerated idea of his mental powers, his strength & his wealth. His speech is slurred.

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, Antrim Asylum Dunmurry
DATED this Ninteenth day of August One thousand nine hundred and four 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, William Caldwell, being (1) doctor of medicine of the Royal University of Ireland, hereby certify, on soul and conscience, that I have this day, at (2) 62 Donegal Street in the County of the Borough of Belfast, seen and personally examined William Lovett Gaussen, 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.

William Caldwell.

DATED this seventh day of August, 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 William Lovett Gaussen to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Julia Emma Gaussen
Date 10th August 1905 Alexandria Park Holywood

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

I, John Clerk, Esquire Honorary Sheriff Substitute of the (4) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) Julia Emma Gaussen, Alexandria Park, Holywood, Belfast, Certificates under the hands of William Caldwell, 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) William Lovett Gaussen, Commission Agent, Alexandria Park, Holywood, Belfast, and that the said William Lovett Gaussen, 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 William Lovett Gaussen as a Patient into the (8) 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 William Lovett Gaussen, 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 Fourteenth day of August, One thousand nine hundred and five years.

To the Superintendent of the (8) Public
Asylum of Crichton Royal Institution,
Dumfries.

[Signature] John Clerk

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

No. 9435.

William Lovett Lawson

Adm: 11 August 1905.

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 Barbara Hairstens, 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 Barbara Hairstens 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 Eleventh (*) day of August— One thousand nine hundred and Five 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 Hairstens.
2. Sex and age,	Femal. 44.
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,	49 St Michael St, Dumfries.
7. Place where found and examined,	Do Do
8. Length of time Insane,	About 5 weeks.
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,	Nowhere.
12. Duration of Existing Attack,	about 5 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,	Dumfries,
18. Date of becoming Chargeable,	11th August 1905.
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 Hairstens Sister 49 St Michael St. Dumfries 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 Eleventh day of August, One thousand nine hundred and Five Years.

(To be signed by the party applying) Miles Mc Innes

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, 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) 49 St Michael Street Dumfries, in the County of Dumfries, separately from any other Medical practitioner, visited and personally examined (4) Barbara Hairstens, pauper, 49 St Michael Street Dumfries, and that the said Barbara Hairstens, is a (5) person of unsound 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. Her believes that some one is going to spirit her away. She has delusions hearing voices that people are always talking about her she is always expecting.

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

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

Place of Abode, 27 Castle Street Dumfries

DATED this Tenth day of August One thousand nine hundred and four 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) Doctor of Medicine of 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) 49 St Michael Street Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Barbara Hairstanes, Pauper, 49 St. Michael Street Dumfries, and that the said Barbara Hairstanes, is a (5) person of unsound 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 manner & appearance.
Believes people are conspiring against her.
That the police are coming & take her away.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Annie Hairstanes her sister tells me that she is very troublesome. She gets up at night believing there are people about wishing to do her harm. That she gets very noisy and unmanageable at times.

Name of Medical Designation, George R. Livingston M.D.

Place of Abode, 46 Castle Street Dumfries

DATED this Eleventh day of August One thousand nine hundred and four years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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 Medicine,
hereby certify, on Soul and Conscience, that I have this day, at (2) 49 St Michael Street, Dumfries,
in the County of Dumfries, seen and personally examined Barbara Hairstens, 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.

(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 Tenth day of August One thousand nine hundred and five years. Peter Murray Kerr

(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, Charles Barthew Gorstorun, Advocate, Honorary 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 Robert Livingston, being two Medical Persons duly qualified in terms of an Act, entituled "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) Barbara Hairstens 49 St Michael Street, Dumfries, (Pauper) and that the said Barbara Hairstens, is (3) 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 Hairstens 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 Barbara Hairstens 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 August, One thousand nine hundred and five years. ~~Three~~ printed words deleted.

To the Superintendent of the Public Asylum of the Crichton Royal Institution for Lunatics, at Dumfries.

Charles Barthew Gorstorun

No. 9486.

Name, Barbara Hairsters.
(Dumfries)

Date of Admission, 11 August 1905

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, of ~~Dumfries~~ and his Substitutes,—

The Petition of Jane Lennon, 4 Murray Place, Dumfries,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Lennon, 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 John Lennon, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Jane Lennon

(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 August, 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,	John Lennon.
2. Sex and Age,	Male. 90 years.
3. Married, Single, or Widowed,	Widower.
4. Condition of Life, and previous Occupation (if any),	Formerly attendant in Crichton more recently working Gardener. R.C.
5. Religious Persuasion, so far as known,	4 Murray Place, Dumfries.
6. Previous Place of Abode,	Do
7. Place where Found and Examined,	6 years.
8. Length of time Insane,	Was always peculiar.
9. Whether first Attack,	84 years.
10. Age (if known) on first Attack,	Never.
11. When and where previously under Examination and Treatment (5),	Continuous since beginning.
12. Duration of existing Attack,	Senility.
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,	Miss Jane Lennon 4 Murray Place Dfs. Daughter. Mother was a patient in Crichton.
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 been previously in an Establishment, state when, and date of latest admission or approximation thereto. If never previously under treatment or observation, state the fact.

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

DATED this 15th day of August, One thousand nine hundred and five.

(*To be signed by the Party applying*) Jane Lennon

T. A. C.—Oct. 1904.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Frederick Hugh Clarke, being a (1) Bachelor of Medicine and Master in Surgery 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) 4 Murray Place, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) John Lennon, retired Gardener 4 Murray Place, Dumfries, and that the said John Lennon, is a (5) Person of unsound 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 gets up to sleep for devils sitting on his eyes. Is sure troubled with demoniacal possession, and to fight with them all night.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His daughter, Jane Lennon. 4 Murray Place Dumfries informs me that he accuses her of witchcraft and that he cannot be trusted to be alone.

Name and Medical Designation, Frederick Hugh Clarke M.B.C.

Place of Abode, Charlotte Street, Dumfries

DATED this fifteenth day of August, One thousand nine hundred and five.

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

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

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

(4) *Insert 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 Jupson being a (1) Bachelor 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) 4 Murray Place Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) John Lennon retired gardener 4 Murray place, Dumfries, and that the said John Lennon is a (5) person of unsound 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)
Rambles in his talk complains of a Satanic devil who sits on his eyes & other delusions.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
By his daughter Jane Lennon That he is suspicious of his relations - accuses them of witchcraft & putting poison in his food

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

Place of Abode, 16 Castle St Dumfries

DATED this fifteenth day of August, One thousand nine hundred and five.

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

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

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

(4) *Insert 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, Frederick Hugh Clarke
being (1) Bachelor of Medicine &c.,
hereby certify, on soul and conscience, that I have this day, at (2) 4 Murray Place
in the County of Dumfries, , seen and personally examined
John Lennon, , 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.

Frederick Hugh Clarke MB CM.

DATED this fifteenth day of August, One thousand nine hundred and five 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 Lennon
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Jane Lennon, 4 Murray Place, Dumfries

Date 15th August 1905.

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

I, George Sampion, 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) Jane
Lennon, 4 Murray Place, Dumfries,
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 (4)
John Lennon, 4 Murray Place, Dumfries, Petitioner's Father, and that the said
John Lennon, 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 Lennon, as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize (7) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John
Lennon, 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.
(7) His, or her.

DATED [at Dumfries,] this Sixteenth day of August, One thousand nine hundred and five years.

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

[*Signature*] Geo. Sampson

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

No. 9484.

John Lennon.

Adm: 15 August 1905.

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 Alex Meikle, Inspector of Poor, Leswalt Parish, Glenhouse, Stranraer;

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Laughie Sheuchan Parks Stranraer,

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

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 Margaret Laughie to the Southern Counties' Asylum, and to sanction her 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 following the dates of the Medical Certificates.

DATED this Fifteenth (4) day of August, — One thousand ~~eight~~ nine hundred and five 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 Laughie.
2. Sex and Age,	Female. aged 55 yrs.
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,	Sheuchan Parks Stranraer.
7. Places where Found and Examined,	Sheuchan Parks, Stranraer.
8. Length of time Insane,	about a week.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	14 yrs.
11. When and where previously under Examination and Treatment (5)	In Southern Counties Asylum from May 1891 till Sept 1905.
12. Duration of Existing Attack,	about a 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,	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,	Half-sister. Mrs Ballantyne, Sheuchan Parks, Stranraer. not known
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, till date of latest admission or apprehension thereto. If never 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 Fifteenth day of August — One thousand ~~eight~~ nine hundred and five years.

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

T. & A. C.—March 1890.

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) the house of W Ballantine, Shenkan Parks, Stranraer — in the County of Wigtown
separately from any other Medical Practitioner, visited and personally examined (4) Maggie Caughie, residing with Wm Ballantine,
the said Maggie Caughie, is a (5) person of unsound 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 childish in talk; irritable and excited at the present. 2. At times she has an abstracted look.

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

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

Wm Ballantine informs me that in the last fortnight Maggie Caughie has been very quarrelsome and that last night she was in low company late at night and that she is not to watch and control her.

Name and Medical Designation, J. A. Anderson MD

Place of Abode, Stranraer

DATED this fifteenth day of August — One thousand eight hundred and five 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 and 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 house of Mr Ballantine, Shenkan Parks, Stranraer, in the County of Wigtown
separately from any other Medical Practitioner, visited and personally examined (4) Maggie Caughie residing with Mrs Ballantine, Shenkan Parks Stranraer and that the said Maggie Caughie is a (5) Person of unsound 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) Violent in manner (2) Talks in a rambling manner (3) Suffers from delusions with regard to certain matters about herself.

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

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

Mr Thomas Harper. Said woman annoys me job my excitable at times & becomes violent to her mistress and keeps on talking about getting married & wants to leave her home.

Name and Medical Designation, Thomas Harper MB-CM

Place of Abode Stranraer

DATED this fifteenth day of August — 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) Shandon Parks, Stranraer in the County of Wigtown, seen and personally examined Maggie Laughie, 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.

J. A. Anderson MD

DATED this fifteenth day of August, One thousand eight hundred and five 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 Margaret Laughie to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Alex Meikle Townhouse Stranraer

Date 15th August 1905.

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

I, George Campion, Advocate, Sheriff-Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) Alexander Meikle, Inspector of Poor, Leswalt Parish, Stranraer, Certificates under the hands of John Alexander Anderson, and Thomas Harker, 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) Margaret Laughie, Shandon Parks, Stranraer, Parish, and that the said Margaret Laughie, 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 Margaret Laughie as a Patient into the (7) 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 Margaret Laughie, 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 Sixteenth day of August, One thousand eight hundred and five years.

To the Superintendent of the (9) Public Asylum of Southern Counties, Dumfries.

[Signature] Geo: Campion

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

No. 9438.

Margaret Caughie.

(Leonard)

Adm: 15 August 1905.

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 Andrew Biggam, —
65 Mount Pleasant, Barrow-in-Furness.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Biggam, Mother, —

(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 Biggam, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Andrew Biggam

(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 August, — One thousand nine hundred and five 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 Biggam.
2. Sex and Age,	F. 81.
3. Married, Single, or Widowed,	widowed.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	65 Mount Pleasant, Barrow-in-Furness.
7. Place where Found and Examined,	6 Conder Terrace, Ramsside, ditto
8. Length of time Insane,	12 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,	unknown.
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,	✓
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 Biggam (Husband) 65 Mount Pleasant, Barrow-in-Furness. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

(5) If patient has been previously in an Asylum, state when, and date of latest Order or Approbation thereto. If never 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 17th day of August, — One thousand nine hundred and five.

(*To be signed by the party applying*) Andrew Biggam

T. & A. C.—Sept. 1903. P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Lettis,
being a (1) Lic. Royal College of Physicians Surgeons Edinburgh,
and being in actual practice as a (2) Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 2 Conale Rawpside Barrowburn Turners, in the County of Lancaster, separately from any other Medical Practitioner visited and personally examined (4) Margaret Biggam 2 Conale Rawpside Barrowburn Turners, and that the said Margaret Biggam is a (5) person of unsound 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 Memory of recent past was entirely gone. She could not tell me where she lived or who she lived with. She believed she owned a house in Scotland.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Andrew Biggam, 2 Conale Terrace, Rawpside Barrowburn Turners says:—"Margaret Biggam my brother. She wanders away & is impossible to safeguard her." John Lettis L.R.C.P.

Name and Medical Designation, John Lettis L.R.C.P.

Place of Abode, 21 Clonelaggan Barrowburn

DATED this Eleventh day of August, One thousand nine hundred and five.

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

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

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

(4) Insert 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, Ebenezer Allan,
being a (1) Fellow Royal college of Surgeons Edinburgh,
and being in actual practice as a (2) Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 2 Conale Terrace Rawpside Barrowburn Turners, in the County of Lancaster, separately from any other Medical Practitioner, visited and personally examined (4) Margaret Biggam 2 Conale Terrace Rawpside and that the said Margaret Biggam is a (5) person of unsound 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 under the impression that her father and mother are still alive and she is anxious to return to Scotland as states she can easily walk there. And attempts to escape and walk there on every opportunity.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Biggam states that she escaped through the window one on being followed by a neighbour she agreed to return and stated that she was going to Scotland, that train is passing her to return but she said she would throw herself under the train if not allowed to go.

Name and Medical Designation, E. Allan. M.R.C.S.

Place of Abode, Barrow: Turners

DATED this 16th day of Aug. One thousand nine hundred and five.

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

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

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

(4) Insert 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, John Settle
being (1) a Lic. Roy. Col. of Physicians & Surgeons, Edin.
hereby certify, on soul and conscience, that I have this day, at (2) 2 Cowdenknowe
in the County of Dumfries, seen and personally examined
Margaret Biggam, 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 Institute, Dumfries.

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

John Settle M.R.C.P.Ed.

DATED this 17th day of August One thousand nine hundred and five.

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

(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 Biggam
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Andrew Biggam

Date 17th August 1905.

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

I, George Sampson, Esquire, Advocate, Sheriff-Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) Andrew Biggam, 65 Mount Pleasant, Barrow-in-Furness Certificates under the hands of John Settle, and Ebenezer Allan 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) Margaret Biggam, 2 Buccleuch Terrace, Rampside, Barrow-in-Furness, (Pt's mother) and that the said Margaret Biggam, 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 Margaret Biggam 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 Margaret Biggam 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.
(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 Eighteenth day of August, One thousand nine hundred and five years.

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

[Signature] Geo. Sampson

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

No. 9439.

Margaret Biggam.

Adm: 14 August 1905.

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.

(2) Sheriff or Steward. (3) Shire or Stewartry.

Unto the Honourable the (2) Sheriff — *of the* (3) Dumfries and Galloway — *and his Substitutes,*— at Dumfries.

The Petition of James Purves, M.C., 32 Queen Street, Edinburgh,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Dr. Alexander Black 13 Howe Street, Edinburgh, your Petitioner's (4) client, & personal friend of 30 years, — 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 Dr. Alexander Black, — to the Crichton Royal Institution, Dumfries, and to sanction his admission into the said Asylum.

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

(*To be signed by the Party applying*) Jas Purves, M.C.

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

Dated this ~~eighteenth~~ twenty first (5) day of August, — One thousand nine hundred and five 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 Black.
2. Sex and Age,	Male - 51.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Medical Practitioner, M.B.C.M.E. F.R.C.P. Edin.
5. Religious Persuasion, so far as known,	Church of Scotland.
6. Previous Place of Abode,	Cupar Fife.
7. Place where Found and Examined,	Edinburgh.
8. Length of time Insane,	About three months since first symptoms appeared.
9. Whether first Attack,	Yes.
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment (6)	The present acute attack has developed within the last week.
12. Duration of existing Attack,	Family troubles - bereavement &c
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	Believed to be dangerous to himself and others
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	NO - 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,	Miss Black, Castleland, Fallin, Dunblane, Crieff Lodge, both Cupar, Mrs Robertson, Comber, Ireland, sisters. Had an elder brother who was for some years.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(6) If patient has been previously in an Establishment, state when, as 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 ~~eighteenth~~ Nineteenth day of August, — One thousand nine hundred and five.

(*To be signed by the Party applying*) Jas Purves.

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 Ormiston Affleck M.D. being a (1) Fellow of the Royal College of Physicians Edinburgh and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) 13 Howe Street Edinburgh, in the County of Edinburgh, separately from any other Medical Practitioner, visited and personally examined (4) Dr Alexander Black, and that the said Dr Alexander Black, is a (5) person of unsound 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 with occasional fits of maniacal excitement. Confused and irrational talk. Delusions. that there are people seeking to injure him; that he is being swindled &c &c. His whole demeanour indicates mental aberration and the symptoms are increasing daily. He is dangerous both to himself and others, and he cannot be left alone. I have had him under observation throughout his illness, and regard his case as

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Facts confirmatory of above as to change in behaviour, necessity for constant watching, delusions &c Communicated by his housekeeper Mrs Hannah; also by Dr Mellegan of Lancashire, under whose care he was for some time recently.

Name and Medical Designation, J. Affleck M.D. R.C.P.

Place of Abode, 38 Heriot Row Edinburgh

DATED this Eighteenth day of August One thousand nine hundred and five 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 Medicine & Master in Surgery M.B. Univ. 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) Dr Alexander Black 7 13 Howe Street Edinburgh, and that the said Alexander Black, is a (5) person of unsound 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 unusual appearance and manner He has delusions of great wealth. He has run 20 millions Tales of great length. He believes some one [illegible] His speech is markedly irrelevant and incoherent

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, Crichton Royal Dumfries

DATED this nineteenth day of August One thousand nine 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, James Ormiston Affleck, MD
being (1) a Fellow of the Royal College of Physicians, Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) 13 Howe Street, Edinburgh,
in the County of Midlothian, seen and personally examined
Dr Alexander Black,
, 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. Affleck MD, FRCP Ed

DATED this Eighteenth day of August, One thousand nine hundred and five 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 Dr Alexander Black
to whom the foregoing Certificate of Emergency refers. Client & personal friend of 30 years.

Relationship or other capacity in which Applicant stands to Patient, Jas Purves

Signature and Address 32 Queen Street Edinburgh,

Date 19th August 1908.

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

I, George Sampson, 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 Purves,
S.S.C. 32 Queen Street, Edinburgh,
Certificates under the hands of James Ormiston Affleck,
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) Dr Alexander Black, 13 Howe Street Edinburgh, (Pursuer's client) and that the said Dr Alexander Black, as 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 Dr Alexander Black as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize (6) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Dr Alexander Black, 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.
(5) Public, District, Parochial, or Private.
(6) His, or her.

DATED [at Dumfries] this Twenty first day of August,
One thousand nine hundred and five years.

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

[Signature] G. Sampson

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

No. 9444.

Alexander Black.

Adm: 18 August 1905.

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, ~~of~~ ~~and his Substitutes~~,

The Petition of Robert Alexander Mitchell Inspector of Poor of the Parish of Girthon in the Stewartry of Kirkcudbright humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Bennet or Morran your Petitioner's (3) 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 Agnes Bennet or Morran to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) R Mitchell.

(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 August One thousand ~~eight~~ 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,	Agnes Bennet or Morran
2. Sex and Age,	Female. 55
3. Married, Single, or Widowed,	Deserted wife.
4. Condition of Life, and previous Occupation (if any),	out door worker.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Galtshouse.
7. Place where Found and Examined,	Her home in Galtshouse.
8. Length of time Insane,	Some days.
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	No.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution
12. Duration of Existing Attack,	Some days
13. Supposed Cause,	"
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,	Balmaclellan, in the Stewartry of Kirkcudbright
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 Bennet 41 C. Manse Borgue
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Establishment, state act, 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 18th day of August One thousand ~~eight~~ nine hundred and five years.

(*To be signed by the party applying*) R Mitchell

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.

(6) *State the facts.*

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

I, the undersigned, James Michel Cox
being a (1) a Licentiate of the Royal College of Surgeons Edinburgh
and being in actual practice as a (2) Senior Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) Queen St Gatehouse Kirkcudbright in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Agnes Bennet or Moran
the said Agnes Bennet or Moran and that
is a (5) person of unsound 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 incoherent in her talk restless & sleepless, wanders aimlessly about flinging her arms & shrieking

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

She has been throwing paraffin about the street and in the fire and there is extreme danger of her setting the house on fire

Name and Medical Designation, J Michel Cox L.R.C.S. Ed.

Place of Abode, Gatehouse of Fleet

DATED this 16th day of August 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.

(6) *State the facts.*

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

I, the undersigned, William James Alexander MacRae
being a (1) Bachelor of Medicine and Bachelor of Surgery 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) Queen Street Gatehouse of Fleet
in the County of Kirkcudbright Shire separately from any other Medical Practitioner, visited and personally examined (4) Agnes Bennet or Moran. (Pauper)
Queen Street Gatehouse of Fleet
the said Agnes Bennet or 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. :—

1. Facts indicating Insanity observed by myself: (6) She suffers from delusions of persecution, and at times is wildly maniacal restless, sleepless and incoherent in her talk and is quite unfit to look after herself

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

She threatens people and is a great annoyance to her neighbours. She scattered paraffin about the house last night and on a former occasion by her self and others

Name and Medical Designation, W. J. Alexander M.B. & C.M.

Place of Abode Gatehouse of Fleet.

DATED this 18th day of August 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,
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, 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) Robert Alexander Mitchell, Inspector of Poor, Guthrie Gatehouse, — Certificates under the hands of J. M. Cobb Lake and William James Alexander Walker 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 Bennet or Morran, Swan Street, Gatehouse (a pauper) — and that the said Agnes Bennet or Morran 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 Bennet or Morran 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 Agnes Bennet or Morran 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 August, One thousand ~~eight hundred and~~ nine hundred and five years. — Four printed words deleted.

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

[Signature] Geo. Campion

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

No. 9 H H 1

Agnes Bennet or Rottan
(Balnacleddan)

Adm: 18 August 1905.

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 Richard Shannon Thornleigh, Bloomfield, Belfast:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Eleanor Shannon, 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 Eleanor Shannon, 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) Richard Shannon

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

DATED this twenty second (4) day of August, One thousand nine hundred and five 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,	Eleanor Shannon.
2. Sex and Age,	Female. 46.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Married woman.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Thornleigh, Bloomfield, Belfast.
7. Place where Found and Examined,	Thornleigh, Bloomfield, Belfast.
8. Length of time Insane,	Eight Days.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	46.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Eight Days.
13. Supposed Cause,	Climacteric.
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,	—
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,	Richard Shannon, above designed, Husband. A sister was insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(5) If patient has been previously in an Asylum, Hospital, or Licensed House, state the name, and date of latest admission or approximate date thereto. If patient has been previously under any mental disease or treatment, state the fact.

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

DATED this twenty first day of August, One thousand nine hundred and five years.

(To be signed by the party applying) Richard Shannon

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Samuel Bryars, being a (1) Physician (L R C P & S Ed') and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) Thornleigh Bloomfield Belfast in the County of Down separately from any other Medical Practitioner, visited and personally examined (4) Eleanor Shannon of Thornleigh Bloomfield Belfast, and that the said Eleanor Shannon is a (5) person of unsound 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.*

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) that she is very depressed, says people are watching and that she is constantly charged with electricity.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Richard Shannon patient's husband tells me that she got outside of her bedroom window in her nightgown & tried to get into the street.

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

Place of Abode 239 Mountpottinger Rd Belfast

DATED this 21st day of August One thousand nine hundred and five.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Peter Murray Kerr being a (1) Bachelor Medicine Master in Surgery & Bachelor Midwifery 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) Eleanor Shannon Thornleigh Bloomfield Belfast and that the said Eleanor Shannon is a (5) person of unsound 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.*

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her insane appearance and manner she is very excited & confused incoherent in speech. Believes that some one charges her with electricity in order to steal from many.

(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, 20 Castle Street Dumfries

DATED this twenty-second day of August One thousand nine 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 Samuel Bryars
being (1) L.R.C.P.S. hereby certify, on soul and conscience, that I have this day, at (2) Bloomfield in the County of Down, seen and personally examined Eleanor Shannon, 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. ~~Date of last~~ examination.

(2) State place at which Asylum is situated.

John S. Bryars

DATED this 21st day of August 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 Asylum to receive therein Eleanor Shannon to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Richard Shannon

Date 21st Augt 1905.

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

I, George Sanderson, Esquire, (Advocate) Sheriff-Substitute, of the (1) Shires and Galloway at Dumfries having had produced to me, with a Petition at the instance of (2) Richard Shannon, Thornleigh, Bloomfield, Belfast. Certificates under the hands of John Samuel Bryars 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) Eleanor Shannon, Thornleigh, Bloomfield, Belfast (Married) and that the said Eleanor Shannon, 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 Eleanor Shannon as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize (6) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Eleanor Shannon, 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.
(6) His, or her.

DATED [at Dumfries,] this Twenty-third day of August One thousand nine hundred and five years. Two words deleted

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

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

[Signature] Geo. Sanderson

cto. 9442.

Eleanor Shannon.

Adm: 21 August 1905.

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 Galloway and his Substitutes, for the Lowthian

The Petition of Mary Ann Hathorn Draper Shaker Hawick, humbly residing in Whithorn

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes McCulloch or Hathorn your Petitioner's (3) mother residing in Whithorn 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 McCulloch or Hathorn 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) Mary Ann Hathorn

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

DATED this 19th (4) day of August. One thousand nine hundred and five

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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,	Agnes McCulloch or Hathorn
2. Sex and Age,	F. 82
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Presb.
6. Previous Place of Abode,	Whithorn
7. Place where Found and Examined,	Do.
8. Length of time Insane,	3 years
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	79
11. When and where previously under Examination and Treatment (3)	
12. Duration of Existing Attack,	
13. Supposed Cause,	old age
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,	Mrs Mary Ann Hathorn Hawick Not known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(3) If patient has previously in an Establishment, state it, and date of latest discharge or approbation 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 19th day of August. One thousand nine hundred and five

(To be signed by the party applying) Mary Ann Hathorn

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 Ramsay Douglas 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) Saint Johns Street, Whitburn in the County of Lothian separately from any other Medical Practitioner visited and personally examined (4) Agnes M.ᶜ Cullock or Hawthorn and the said Agnes M.ᶜ Cullock or Hawthorn is a (5) person of unsound 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 restless and excited, talks incessantly day and night and requires constant watching to prevent her getting up and going outside in her night clothes.

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

Her daughter, Miss Mary Ann Hawthorn informs that the attacks come on periodically, sometimes she knows quite well when to expect them.

Name and Medical Designation, J. R. Douglas. M.B.C.M.

Place of Abode, St Kinians. Whitburn

DATED this 19th day of August 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.

(6) *State the facts.*

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

I, the undersigned, James Fleming Smith Bachelor of medicine & being a (1) 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) Whitburn in the Parish of Whitburn in the County of Lothian separately from any other Medical Practitioner visited and personally examined (4) Mrs Agnes M.ᶜCullock or Hawthorn widow and the said Mrs Agnes M.ᶜCullock or Hawthorn is a (5) person of unsound 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 incessantly & shouts & jumps on the window to attract the attention of the passers by

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

Mary Ann Hawthorn her daughter informs me that she has threatened to murder herself & that sometimes she will be [illegible] waking in hell

Name and Medical Designation, James F. Smith Bachelor

Place of Abode, Whitburn

DATED this nineteenth day of August 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,
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, William Mackie Esquire (1) Sheriff Substitute
of the (2) Dumfries and Galloway of
having had produced to me, with a Petition at the instance of (3) Mary Ann Hathorn Dressmaker Whithorn Hawick presently residing in Whithorn and Certificates under the hands of John Hannay Douglas M.B.C.M. Whithorn 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) Agnes McCulloch or Hathorn Domestic residing in Whithorn and that the said Agnes McCulloch or Hathorn 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 McCulloch or Hathorn as a Patient into the (6) Crichton Royal (Asylum of 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 Agnes McCulloch or Hathorn 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 nineteenth day of August One thousand nine hundred and five years. (three words deleted)

To the Superintendent of the (7) Crichton Royal Institution Asylum of Dumfries

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

[*Signature*] Wm Mackie

No. 9444 8.

Agnes McCulloch or.
Hathorn.

Adm: 21 August 1905.

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,—*

The Petition of John Armstrong residing at Blackford Air by Dalbeattie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Kirkpatrick or Armstrong 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 Kirkpatrick or Armstrong 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 Armstrong

(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 five

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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,	Mary Kirkpatrick or Armstrong
2. Sex and Age,	Female 53
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	✓
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Blackford Air.
7. Place where Found and Examined,	do do
8. Length of time Insane,	about a week
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,	about a week
13. Supposed Cause,	cannot tell
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,	Husband John Armstrong Blackford Air by Dalbeattie — no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

(4) If patient has been previously in an Establishment, state fact, as date of latest admission or appointment 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 twenty first day of August One thousand nine hundred and five

(To be signed by the party applying) John Armstrong

P. P.

T. & A. C.—May 1905.

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, Jamd Archibald David Gillespie being a (1) Bachelor of Medicine & Master in Surgery (Edinr University) and being in actual practice as a (2) General Medicine Practitioner do hereby certify, on soul and conscience, that I have this day, at (3) Blackford Mrs Kirkendright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mrs John Armstrong and that the said Mrs John 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)
Lying in bed constantly muttering — imagines she sees all kinds of things floating about the room. Has been like this for some days with no signs of improvement.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her husband (John Armstrong) says she wont be persuaded to swallow food or drink of any kind. Is apparently getting weaker, & they cant controll her.

Name and Medical Designation, J A D Gillespie MB. Ch

Place of Abode, Dalbeattie

DATED this twenty first day of August 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, Alford William Anderson being a (1) Bachelor of Medicine and Master of Surgery of 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) Blackford, Mrs Kirkendright-blue in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mrs John Armstrong and that the said Mrs John 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)
Saldo is an incoherent rambling manner. Laughing at one time & crying at another. Refused to answer when spoken to and behaves in an insane manner gesticulating & pointing at objects which she fancies she sees on the ceiling.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her husband John Armstrong and Mrs Mackay (nurse) inform me that she has refused all form of nourishment for several days — that they are quite unable to manage her & that she is dirty in her habits.

Name and Medical Designation, Alford William Anderson

Place of Abode, Dalbeattie

DATED this Twenty first day of August One thousand nine hundred and five

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 and Edmund Gillespie
being (1) Bachelor of Medicine Masters in Surgery (Edin.) (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Blackford (2) State place of examination.
in the County of Kirkcudbright, seen and personally examined
Mrs John Armstrong, 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.

J. & E. Gillespie

DATED this twenty first day of August 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 Dumfries
~~Asylum~~ to receive therein Mary Kirkpatrick or Armstrong
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address John Armstrong
Blackford Mr.

Date 24 August 1905

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

I, (1) (1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
of the (2) of (2) State whether a County or Stewartry.
having had produced to me, with a Petition at the instance of (3) (3) Insert Name and Designation.

Certificates under the hands of
and 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.
and that the said
is a (5) (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 as a patient into the
(6) Asylum of and I authorize (6) Public, District, Parochial, or Private.
(7) Transmission to the said Asylum accordingly; and I transmit you herewith (7) His, or her.
the said Medical Certificates, and a Statement regarding the said
which accompanied the said Petition.

DATED [at] this day of
One thousand nine hundred and

To the Superintendent of the (6)
Asylum of (6) Public, District, Parochial, or Private.

[*Signature*]

No. 9444

Mary Kirkpatrick or
Armstrong.

Adm: 21 August 1905.

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 Charles Breckenridge Inspector of Poor of the parish of Penninghame Newton Stewart

humbly sheweth that it appears from the subjoined Statement, and accompanying Medical Certificates, that Andrew Campbell

(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 Andrew Campbell Junr. to the Royal Asylum at Dumfries and to sanction his 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 21st (4) day of August One thousand nine hundred and five 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 Campbell Junr
2. Sex and Age,	Male 38
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Railway Surfaceman
5. Religious Persuasion, so far as known,	Prot
6. Previous Place of Abode,	21 King St Newton Stewart
7. Place where Found and Examined,	do do
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)	Never previously under treatment
12. Duration of Existing Attack,	—
13. Supposed Cause,	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,	Penninghame
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 Campbell. Railway Surfaceman. Princes St. Newton Stewart father 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 fact, and 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 21st day of August One thousand nine hundred and five

(To be signed by the party applying) Charles Breckenridge P. p.

T. & A. C.—June 1902.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Norman James McKie being a (1) Doctor of Medicine of the University of Edinburgh 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) 21 King Street Newton Stewart in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Andrew Campbell 21 King Street Newton Stewart - Pauper. the said Andrew Campbell and that is a (5) person of unsound 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.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Wild eyes, flushed face, changed expression, refuses food and medicine. Talking and shouting at the top of his voice.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Harry Magnus 22 King Street
Campbell tried to leave the house in his night-dress. Very noisy and talking nonsense.

Name and Medical Designation, Norman James McKie M.D.

Place of Abode, 14 Arthur Street Newton Stewart

DATED this twenty-first day of August One thousand nine hundred and five

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MEDICAL CERTIFICATE, No. II.

I, the undersigned, James Gibbons Dickson being a (1) Doctor of Medicine - University of Glasgow 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) 21 King Street, Newton Stewart Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Andrew Campbell, 21 King Street, Newton Stewart - Pauper the said Andrew Campbell and that is a (5) person of unsound 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.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Wild excitement. Violent and requires control. Raving and incoherent in his talk.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Harry McGinnes 22 King Street
Usually a very quiet and inoffensive man his manner and behaviour has completely changed. Refuses food and drink.

Name and Medical Designation, James G. Dickson. M.B.

Place of Abode, Woodlea, Newton Stewart

DATED this twenty first day of August 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,
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 Watson, (1) Sheriff Substitute
of the (2) County of Renfrew
having had produced to me, with a Petition at the instance of (3) Charles Brakenridge inspector of Poor of Renfrew parish
Certificates under the hands of Alexander Jas. Reid
and James G. Gideon 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) Andrew Campbell Pauper and that the said Andrew Campbell is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Andrew Campbell as a Patient into the (6) Royal Asylum of Lunatics 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 Andrew Campbell which accompanied the said Petition.

DATED [at Newton Mearns] this 21st day of August One thousand nine hundred and five

To the Superintendent of the (7)
Scottish Asylum of Lunatics

[*Signature*] Geo. Watson

(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. 9445.

Andrew Campbell jun.
(Pennyghame)

Adm: 21 August 1905.

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 Alfred George March of 4 Windsor Terrace, Tosforth, in the County of Northumberland, Third Assistant Clerk to the Justices of Newcastle-upon-Tyne

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Ellen Stabell, —

(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 Ellen Stabell — to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Alfd Geo. March

(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 August, — 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,	Ellen Stabell.
2. Sex and Age,	Female. 47.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Housekeeper.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	4 Windsor Terrace. Tosforth Northumberland.
7. Place where Found and Examined,	Dumfries.
8. Length of time Insane,	Supposed to have developed during the last three years.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	Probably 44.
(5) If patient has previously in an establishment, state when, at date of latest admission or approximate thereto. If previously under examination or treatment, state fact. 11. When and where previously under Examination and Treatment (5)	About 12 months ago examined & treated by Dr Cyle (Specialist) Jesmond Road, Newcastle-upon-Tyne.
12. Duration of Existing Attack,	Probably about 3 years.
13. Supposed Cause,	Unknown to petitioner.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Not at all.
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,	Mary Ann March (sister) (wife of Alfred George March, the petitioner) 4 Windsor Terrace. Tosforth Northumberland. No other member of family known to have been insane
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 Second day of August, — One thousand nine hundred and five.

(To be signed by the party appying) Alfd Geo. March

T. & A.,C.—Dec. 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, John Rutherford Gilmour
being a (1) Bachelor of Medicine 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, Dumfries, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Ellen Stabell, of 4 Windsor Terrace, Gosforth, Northumberland, and that the said Ellen Stabell is a (5) Person of unsound 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 agitated and depressed. She has delusions of persecution believing that she is libelled everywhere, and that she has been the subject of grave scandal. She appears to have hallucinations of hearing.

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

Name and Medical Designation, J. R. Gilmour M.B.

Place of Abode, Scalebor House, Burley in Wha

DATED this twenty sixth day of August, 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.

(6) *State the facts.*

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

I, the undersigned, George Robert Livingston
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) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Ellen Stobell, of 4 Windsor Terrace Gosforth, Northumberland, and that the said Ellen Stobell is a (5) Person of unsound 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 excitable.
She has delusions. Believing she is the subject of organised persecution. And that unfounded stories of a scandalous nature are being circulated about her.

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

Name and Medical Designation, George R. Livingston M.D.

Place of Abode, 4 Castle Street Dumfries

DATED this twenty first day of August, 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,
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 Lampion, 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) Alfred George Hearth, 4 Windsor Terrace, Gosforth, Northumberland, Certificates under the hands of John Rutherford Gilmour, and George Robert Livingstone, 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) Ellen Stabell, 4 Windsor Terrace, Gosforth, Northumberland, and that the said Ellen Stabell, 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 Ellen Stabell as a Patient into the 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 Ellen Stabell, 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 five 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: Lampion

No. 9446.

Ellen Stabell.

Adm: 23 August 1905.

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 Samuel Rigg Inspector of Poor of the Parish of Kelton

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Herries, ~~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 Herries, ~~Pauper~~ 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 2~~1~~4th (3) day of August, —One thousand nine hundred & 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 Herries.
2. Sex and Age,	Female. 32. 30
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Was Domestic Servant.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Rhonehouse.
7. Place where Found and Examined,	Do.
8. Length of time Insane,	Nine years.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	23.
11. When and where previously under Examination and Treatment (4)	Southern Counties Asylum.
12. Duration of Existing Attack,	Nine years.
13. Supposed Cause,	Heredity.
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,	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,	Mother. Mary Herries. Several times in Southern Counties Asylum.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(4) If patient has been previously in an Establishment, state the date of latest admission or approximation thereto. If never 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 2~~1~~4th day of August, —One thousand nine hundred & five.

(To be signed by the party applying) Samuel Rigg

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.

I, the undersigned, Robert Bell Lorraine
being a (1) Graduate of Edinburgh University (Queen's Hospital)
and being in actual practice as a (2) Licensed Practitioner,
do hereby certify, on soul and conscience, that I have this day, at (3) Rhonehouse, Kirkcudbrightshire, in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Mary Herries. Pauper, Rhonehouse Kirkcudbrightshire and that the said Mary Herries, is a (5) person of unsound 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)
Rambling & incoherent. Unable to understand what she said to be. Excited and talkative.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Rankin states that she attended her and that she has been most excited and troublesome then for some time.

Name and Medical Designation, Robert Bell Lorraine
M.B. Cal. Edin

Place of Abode, Crichton Dumfries

DATED this twenty fourth day of August — 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, Kate Fraser,
being a (1) Bachelor of Medicine & Bachelor of Surgery 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) Crichton Royal Institution, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Herries, Pauper, Rhonehouse, Kirkcudbrightshire and that the said Mary Herries, is a (5) person of unsound 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 excited and incoherent. Says she is Queen Victoria, and that she died four years ago and is now in heaven.

(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, Kate Fraser M.B. Ch.B. Edin

Place of Abode Crichton Royal Institution, Dumfries

DATED this twenty fourth day of August, — 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, Robert Bell Lorraine
being (1) a graduate of Edinburgh University (M.B. C.M.)
hereby certify, on soul and conscience, that I have this day, at (2) Rhonehouse
in the County of Kirkcudbright, seen and personally examined
Mary Herries, Pauper Lunatic, 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.

Robert Bell Lorraine

DATED this twenty fourth day of August, 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 ~~Asylum~~ Southern Counties Asylum to receive therein Mary Herries, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Samuel Rigg Castle Douglas

Date 24th Aug 1905.

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

I, George Sampson, Advocate, (1) Sheriff Substitute, of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) Samuel Rigg, Inspector of Poor, Repton, Certificates under the hands of Robert Bell Lorraine, and Kate Fraser, 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 Herries, Rhonehouse, Kirkcudbrightshire Pauper and that the said Mary Herries, 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 Herries, 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 Mary Herries, 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 August, One thousand nine hundred and five years.

To the Superintendent of the (6) Public *Asylum of* Southern Counties Dumfries.

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

[Signature] Geo: Sampson

No 9444.

Mary Herries.

(Kelton)

Adm: 8th August 1905.

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) County~~ of Renfrew & Bute and his Substitutes,—

The Petition of Mrs Mary Young or Forsyth residing at Ivybank Port Glasgow humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Forsyth residing at Ivybank Port Glasgow 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 Forsyth to the Crichton Royal 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*) Mary Forsyth

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

DATED this 22nd (4) day of August One thousand nine hundred and five

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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,	John Forsyth
2. Sex and Age,	Male 43
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Master Plasterer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Ivybank Port Glasgow
7. Place where Found and Examined,	Ivybank Port Glasgow
8. Length of time Insane,	four months
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	43
11. When and where previously under Examination and Treatment (5)	Never previously
12. Duration of Existing Attack,	four months
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not attempted but has talked of it
16. Whether Dangerous to others,	Not so far
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,	wife Mary Forsyth applicant Robert Forsyth Plasterer Govan brother a brother committed suicide twenty years ago
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

(5) If patient has previously in an asylum, state last date of latest admission thereto. If previously under treatment elsewhere, state where.

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

DATED this 22nd day of August One thousand nine hundred and five

(*To be signed by the party applying*) Mary Forsyth

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 Butler being a (1) Bachelor of Medicine & Master in Surgery 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) Port Glasgow in the County of Renfrew separately from any other Medical Practitioner visited and personally examined (4) John Forsyth, Flesher Ivybank, Port Glasgow and that the said John Forsyth is a (5) person of unsound 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 highly nervous restless condition, refuses food & is quite unable to put his attention on any subject for any length of time. He has delusions that enemies are plotting against him, that his money is gone & that his wife & children are deserting him. He is very suspicious.

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

Mrs Forsyth, his wife, states that he declined to do business, introduced fictitious creditors, refused his shop key & on the 19th inst. left the house, stating his money was gone & that he had no more courage. Mrs Forsyth also states that he moved down at Sir Peter Macdonald's desk & took it.

Name and Medical Designation, Alexr Butler M.B. C.M.

Place of Abode, Bankhead, Port Glasgow

DATED this twenty-second day of August 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.

(6) *State the facts.*

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

I, the undersigned James Lawrie being a (1) Graduate in 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) Port Glasgow in the County of Renfrew separately from any other Medical Practitioner visited and personally examined (4) John Forsyth, Flesher Ivybank, Port Glasgow and that the said John Forsyth is a (5) person of unsound 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 unable to fix his attention on a subject for any length of time: delusions, e.g. "that he has got into a hole and one is trying to get his money & turn his wife & children to the door": He is apprehensive & suspicious—

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By his wife—He shut up his business, would not stock his shop—as he was ruined; he has threatened suicide

Name and Medical Designation, James Lawrie M.B. C.M.

Place of Abode, 28 Ardgowan St. Greenock

DATED this twenty-second day of August 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,
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, Edward Wilson, Esquire Sheriff Substitute
of ~~the~~ (2) Renfrew and Bute ~~of~~
having had produced to me, with a Petition at the instance of (3) Mrs Mary
Ewing of Forsyth, residing at Ivybank Port Glasgow
Certificates under the hands of Alexander Butler
and James 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)
John Forsyth and that the said
John Forsyth 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 Forsyth as a Patient into the (6) Crichton Royal ~~Asylum of~~ 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 John Forsyth which accompanied the said Petition.

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

(3) State whether a County or Stewartry.

(4) 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 23rd day of August
One thousand nine hundred and five. (Four printed words delete)

To the Superintendent of the Crichton Royal Institution
Asylum of Dumfries

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

[*Signature*] Edward Wilson

No. 9448.

John Forsyth.

Adm: 25 August 1905.

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 Philip John Dobson Gelt dale Castle Carrock Carlisle

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Philip Bushby Dobson

(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 Philip Bushby Dobson — to the Cumberland Royal Infirmary — and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Philip John Dobson

(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 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,	Philip Bushby Dobson
2. Sex and Age,	Male 52
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Gelt dale Castle Carrock Carlisle
7. Place where Found and Examined,	Gelt dale Castle Carrock Carlisle
8. Length of time Insane,	10 months
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	61.
11. When and where previously under Examination and Treatment (5)	Nowhere
12. Duration of Existing Attack,	10 months
13. Supposed Cause,	Heredity
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,	Philip John Dobson Gelt dale Castle Carrock Carlisle Mother died insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has been previously in an Establishment, state it, with date of latest Admission or approximation thereto. If never 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 August One thousand nine hundred and five

(To be signed by the party applying) Philip John Dobson

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, James Arnott

being a (1) Doctor of Medicine, Durham

and being in actual practice as a (2) Surgeon

do hereby certify, on soul and conscience, that I have this day, at (3) Gelt Side Castle Carrock, Carlisle in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Philip Bushby Dobson, Gelt Side, Castle Carrock, Carlisle and that the said Philip Bushby Dobson is a (5) person of unsound 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 very restless & has been excited, cannot keep still. He says he is being starved, that his son will not allow him to have enough food that he sleeps on the farm as well as the horses are allowed to go without them.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His Son, Philip John Dobson says that his father became very violent & threatened to kill him & that he will sometimes storm for an hour & more at a time.

Name and Medical Designation, James Arnott M.D.

Place of Abode, Rose Hill, Brampton. Cu

DATED this 29th day of August — One thousand nine hundred and five.

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

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

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

(4) *Insert 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, Harry Young Thompson

being a (1) Licentiate of Society of Apothecaries, London

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) Gelt Side Castle Carrock: nr. Carlisle in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Philip Bushby Dobson, aged Farmer: Gelt Side, Castle Carrock; and that the said Philip Bushby Dobson is a (5) person of unsound 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) Philip Bushby Dobson was holding a newspaper but not reading, was very restless & swaying about from side to side, and going from side from to the other, & then from middle of room to window, & did not appear to be interested in what was said to him; lifting his feet alternately as he

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Elizabeth Jane Dobson, daughter, tells me that he has been very violent lately, uses very bad language, has struck his Wife and daughter, threatens to kill them, says that he is being taunted by the police that he is being stabbed by

Name and Medical Designation, H. Y. Thompson L.S.A. Lond.

Place of Abode, 58 Front St. Brampton, Cumberland

DATED this 28th day of August — One thousand nine hundred and five.

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

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

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

(4) *Insert 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 Arnott
being (1) a Doctor of Medicine. Durham
hereby certify, on soul and conscience, that I have this day, at (2) Gelt's dale
in the County of Cumberland, seen and personally examined
Philip Bushby Dobson, 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 Arnott. M.D.

DATED this 29 day of August 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 Philip Bushby Dobson to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Philip. Bushy. Dobson

Date 29 August 1905

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) Philip John Dobson, Gelt's dale, Castle Carrock Carlisle, Certificates under the hands of James Arnott, and Harry Young 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) Philip Bushby Dobson, Gelt's dale, Castle Carrock Carlisle, Retired Farmer and that the said Philip Bushby Dobson 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 Philip Bushby Dobson 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 Philip Bushby Dobson 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 Thirty-first day of August One thousand nine hundred and five 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. 9449.

Philip Bushby Dobson.

Adm: 29 August 1905.

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 Samuel McKee, Inspector of Poor of Buittle, residing at Palnackie,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Crocket

(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 Agnes Crocket to the Crichton Royal Institution, Dumfries, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Samuel McKee

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

DATED this 30th — (4) day of August — 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,	Agnes Crocket
2. Sex and Age,	Female! 40 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	No occupation at present previous a Masseuse.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Palnackie,
7. Place where Found and Examined,	Palnackie
8. Length of time Insane,	3 weeks
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	38 years.
11. When and where previously under Examination and Treatment [*name of Establishment into which last received, and Year of Reception or approximation thereto*],	In private Home, London. (Name of Establishment unknown — year of reception (approximate 1903).
12. Duration of Existing Attack,	Three weeks
13. Supposed Cause,	Hereditary: Living alone.
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,	Buittle Parish
18. Date of becoming Chargeable,	30th August, 1905
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 Mein. Palnackie, Sister. Had Sister (Isabella Crocket) at present in the Crichton Royal Inst. Dumfries
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 30th — day of August — One thousand nine hundred and five

(*To be signed by the party applying*) Samuel McKee.

T. & A. C.—June 1894.

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, Alford William Anderson
being a (1) Master of Surgery & Bachelor of Medicine of the Universal
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) Palnacadie Kirkandbrightshire in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Agnes Crockett pauper,
the said Agnes Crockett and that 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)
She is excited and suspicious in her behaviour, admit no one into her house & conversed with me from a window which a red flag is flying - says all the village are against her & she must keep the people away from her - will communicate only with headquarters as people are in league against her

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Beattie (a neighbour) says she keeps her door constantly except during the night when she wanders about. Has become more excited & strange in her behaviour during the past few days. People are afraid to be near her

Name and Medical Designation, Alford William Anderson M.B. & C.M.

Place of Abode, Dalbeattie.

DATED this twenty-ninth day of August One thousand eight hundred and five

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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, Samuel Archibald David Gillespie
being a (1) Bachelor of Medicine & 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) Village of Palnackie Kirkandbright in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Agnes Crockett
the said Agnes Crockett and that is a (5) person of unsound 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)
Wont come out or open the door - Suspicious of her neighbours, thinks she is being wronged & that friends, can't get near her for her neighbours. Has red flags out in some of her windows - Seems dangerous and threatening in her conduct.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
A neighbour (Mrs Graham) says she wanders about village at night - Wont open her door to anyone during the day. All the village dare not go near her

Name and Medical Designation, S. A. D. Gillespie M.B. C.M. Edin.

Place of Abode Dalbeattie

DATED this twenty-ninth day of August One thousand eight 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, Samuel Arch^d David Gillespie being (1) Bachelor of Medicine & Master in Surgery hereby certify, on soul and conscience, that I have this day, at (2) Palnackie in the County of Kirkcudbright, seen and personally examined Agnes Crocket, 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.

T. A. D. Gillespie

DATED this twenty second day of August One thousand ~~eight~~ 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 Agnes Crocket to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Petitioner's Pauper

Signature and Address Samuel M'Kee, Insp. of Poor, Buittle, Palnackie

Date 30th Augt. 1905.

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) Samuel M'Kee, Inspector of Poor, Buittle, Palnackie — Certificates under the hands of Alfred William Anderson — and Samuel Archibald 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)— Agnes Crocket, Loaning Place, Palnackie, ~~is pauper~~ and that the said Agnes Crocket — is a (4) Lunatic ~~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 Agnes Crocket 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 Agnes Crocket 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 Sixty-first day of August One thousand ~~eight~~ nine hundred and five years. Four words deleted

Jn^o Clerk

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

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

No. 9450.

Agnes Crocket.

(Buittle)

Adm: 30 August 1905.

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 ~~Kirkcudbright~~ and his Substitutes, — at Dumfries.

The Petition of R. M. M'Clew
Inspector of Poor, Parish of Portpatrick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie adams ——— 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 Jessie adams ——— 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) R. M. M'Clew

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

DATED this 29th — (4) day of August — One thousand ~~eight~~ 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,	Jessie adams
2. Sex and Age,	Female 46 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,	Enermeckroft, Portpatrick
7. Place where Found and Examined,	
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 (5),	
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,	Portpatrick
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 adams Enermeckroft Portpatrick 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 thereto. 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 29th day of August — One thousand ~~eight~~ nine hundred and five

(To be signed by the party applying) R. M. M'Clew

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, John James Robertson
being a (1) Bachelor of Medicine & Master in Surgery of the Univ. of
and being in actual practice as a (2) Physician & Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) Merrick Croft
Portpatrick
Wigtown
in the County of
visited and personally examined (4) Jessie Adams (Pauper)
separately from any other Medical Practitioner,
the said Jessie Adams
and that
is a (5) Person of unsound 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 shows more of the cunning
Suspicious & wicked subtlety. On talking the most ordinary question
does not give any reply of a sensible kind, but uses disconnected
language. Attempts to frequently assault those near her by throwing stones &c.

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

Name and Medical Designation, John James Robertson

Place of Abode, Portpatrick

Dated this 29th day of August — One thousand ~~eight~~ 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.

(6) *State the facts.*

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

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) The Lighthouse
Portpatrick, Stranraer
Wigtownshire
in the County of
visited and personally examined (4) Jessie Adams, pauper, of
Merrick Croft, Portpatrick,
separately from any other Medical Practitioner,
the said Jessie Adams
and that
is a (5) person of
unsound 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 dominated
filthy and verminous. 2. Her eye is expressive of restless
and suspicion. 3. She is defective in intelligence e.g. she do
not know whether she is ten years old or not. 4. She is ver
depressed and admits that she has been living on turnips and p

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

Wm Ormiston, Matron of the Lighthouse Poor House, states
that the said Jessie Adams has just been brought to the Poorhouse
in a neglected and filthy condition with her arms in restraint and
in charge of a constable.

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

Place of Abode Stranraer

Dated this twenty-ninth day of August — One thousand ~~eight~~ nine 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) Wigtownshire
in the County of Wigtown, seen and personally examined
Jessie Adams, 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. A. Anderson M.D.

DATED this twentyninth day of August — One thousand ~~eight~~ nine hundred and five 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 Jessie Adams —
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address R. M. M'Clew

Date 30th August 1905.

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

I, John Clerk, Esquire, Honorary, Sheriff Substitute
of ~~the~~ (4) Dumfries and Galloway at Dumfries
having had produced to me, with a Petition at the instance of (5) R. M. M'Clew,
Inspector of Poor, Portpatrick,
Certificates under the hands of John James Robertson
and John Alexander Anderson — 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)
Jessie Adams, Merrick Croft, Portpatrick (a pauper)
and that the said Jessie Adams — 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 Jessie Adams 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 Jessie Adams 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 thirtyfirst day of August
One thousand ~~eight~~ hundred and five years. Three words deleted

To the Superintendent of the (8) Asylum of Public Crichton Royal Institution Dumfries.

[Signature] Jno Clerk
Sh Clerk

No. 9451

Jessie Adams.

(Pottpatrick)

Adm: 30 August 1905.

RD OF LUNACY
31 AUG 1905

14.949.

[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.

We the undersigned (1) John Milwain

are desirous to transfer James Wither Milwain

at present a Patient in Glasgow Royal Asylum Gartnavel and (2) detained at my instance

from the said Asylum to the Crichton Royal Institution; Dumfries

and do 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."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	James Wither Milwain
2. Sex and Age,	Male 46
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Warehouseman
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
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 Milwain (Father) 2 Athole Gardens Terrace Glasgow W. Two sisters of his mother 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.

(*Signature of Applicant*) John Milwain

(3) Brother Curator
2 Athole Gardens Terrace Glasgow W

(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 30th day of August One thousand nine hundred and five

---

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. & C.—Feby. 1903.

MEDICAL CERTIFICATE.

I, the undersigned Robert Dunmore Hotchkis

(1) Name Asylum. hereby certify that I have this day at (1) Royal Asylum Gartnavel personally examined James Wither Milwain

(2) Insert Date of Admission. Patient in said Asylum since (2) November 19th 1894 and I certify

(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) might be suic

(4) Describe Mental State. (4) is dangerous to others. I also certify, with respect to the Mental Sta the Patient, that (4) he is full of delusions & suspic e.g. that there is a gigantic conspiracy to ruin that he has been made to drink lepers blood an to eat human flesh.

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5)

He is ~~fat~~ in average health and conditi

and that there is nothing in the Mental or Bodily State of the Patient to make remo to the (1) Crichton Royal Institution Dumfries Asylum inadvisable; a

(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 p 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 :—

Ten or eleven years ago he was distinctly suicidal and made several attempts. He has twice escaped from Gartnavel Asylum.

(Signature) R. D. Hotchkis

(Medical Qualification) M.D. Durh.

(Date) Aug. 30th 1905.

No. 9458
James Wither Milwain
Adm: 1 September 1905.

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 James Wither Milwain
from Glasgow Royal 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.

John Fraser Commissioner.

DATED at Edinburgh, this 31st day of August One thousand nine hundred and five.

Date of Sheriff's Order *[to be inserted at the Office of Board].*

20th November 1894.

14,952. [FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

BOARD OF LUNACY
REC'D 2 SEP 1903
EDINBURGH

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned (1) Patrick M. Rodie, Insp. of Poor, Kirkmaiden being desirous to transfer Richard McCracken present a Patient in Govan District asylum and (2) a Pauper Lunatic of the Parish of which I am Insp. of Poor from the said Asylum to the Crichton Royal Institution

(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."

I go 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,	Richard McCracken.
2. Sex and Age,	Male. 24
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and Previous Occupation (if any),	Labourer (Farm)
5. Religious Persuasion, so far as known,	Protestant.
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	Kirkmaiden.
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,	Father. Thos. McCracken. 8 Ritker Street Whiteinch. Glasgow.

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*) P. M. Rodie.

(2) Insp. of Poor of the Parish of Kirkmaiden.

(2) 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 first day of September One thousand nine hundred and three.

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.

(1) Name Asylum.

I, the undersigned William Riddell Walson hereby certify that I have this day at (1) Govan District Asylum personally examined Richard McCracken who has b

(2) Insert Date of Admission. Patient in said Asylum since (2) 9 February 1905 and I certify

(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 suic

(4) Describe Mental State. (3) is not dangerous to others. I also certify, with respect to the Mental Sta the Patient, that (4) he is the subject of General Paralysis of the Insane.

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5) it is under average

and that there is nothing in the Mental or Bodily State of the Patient to make remo to the (1) Crichton Royal Institution Asylum inadvisable; a

(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 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:—

His habits are dirty: his fact is insteady

(Signature) W R Walson

(Medical Qualification) LRCS LRCP Ed.

(Date) 30 August 1905

No. 9458.
Richard McCracken.
(Kirkmaiden)
Adm: 6 September 1905.

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 Richard McCracken from Govan 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.

John Macpherson Commissioner ~~Secretary~~.

DATED at Edinburgh, this 2nd day of September, One thousand nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

10th February 1905

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* and Galloway — *and his Substitutes,* — at Dumfries.

The Petition of Lizzie Glencross
15 High Street. Sanquhar

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Glencross 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 John Glencross 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) Lizzie Glencross

(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 five 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 Glencross
2. Sex and Age,	Male age 68
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Stone Diker
5. Religious Persuasion, so far as known,	~~united~~ Protestant
6. Previous Place of Abode,	Sanquhar
7. Place where Found and Examined,	Sanquhar
8. Length of time Insane,	15 years
9. Whether first Attack,	no
10. Age (if known) on first Attack,	53
11. When and where previously under Examination and Treatment (5)	Crichton Royal Inst
12. Duration of existing Attack,	4 Months
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,	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,	William Glencross. (Son) 15 High St Sanquhar (Younger Brother Boarder with Aunt
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If Patient has previously been in an Asylum, state Name and Date of latest Admission or approximate thereto. If previously under Medical 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 five years.

(To be signed by the Party applying) Lizzie Glencross

T. A. C.—Oct. 1904.

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 Riches Rodger
being a (1) Bachelor 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) Hyde St. Lanfrica
Dumfries
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) John Gleneross
and that the said John Gleneross
of unsound mind
is a (5) 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)
Patient has sometimes been incoherent when speaking to me; has been subject to severe fits of mental depression previous to present illness. Suicidal tendencies.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Gleneross tells me today that yesterday he had to be kept from himself, was restless like a caged animal, & kept talking to himself; today he is sleeping and dozing: he has taken no nourishment

Name and Medical Designation, T. R. Rodger M.B. Ch.B.

Place of Abode, Crichton Hall, Dumfries

DATED this 7th day of September 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, Mungo Byson
being a (1) Bachelor of medicine & Master in 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) Hyde St
Dumfries
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) John Gleneross. John Gleneross
Hyde St. Dumfries
the said John Gleneross
of unsound mind
and that is a (5) 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)
He is much depressed. States that he is unworthy & cannot sleep - seems apprehensive of something happening to him. His facies expression is morbid, melancholic

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His son informs me that he has been in a depressed mood for month - occasionally has excited outbursts, and this morning he had to take a knife from him as he was apprehensive that he would do himself an injury

Name and Medical Designation, Mungo Byson M.B.Ch.B.

Place of Abode, Thornhill Dumfriesshire

DATED this Seventh day of September 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, Thomas Ritchie Rodger
being (1) Bachelor of Medicine & Bachelor of Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Langholm
in the County of Dumfries, seen and personally examined
John Gleneross, Shoemaker, 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.

T. R Rodger

DATED this 7th day of September 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 John Gleneross to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Daughter in Law

Signature and Address Lizzie Gleneross 16 High St Langholm

Date 7th September 1905.

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 & Galloway, at Dumfries having had produced to me, with a Petition at the instance of (3) Lizzie Gleneross, No 15 High Street Langholm, Certificates under the hands of Thomas Ritchie Rodger and Mungo Benson 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 Gleneross, High Street Langholm (Father-in-law) and that the said John Gleneross 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 Gleneross as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Gleneross 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.
(7) His, or her.

DATED [at Dumfries] this Ninth day of September One thousand nine hundred and five years.

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

[Signature] Geo. Campion

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

Adm: 9454.

John Glencross.

Adm: 4 September 1905.

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) Dumfries of and Galloway — *and his Substitutes,*— at Dumfries;

The Petition of ~~Under~~ William Robert Henry Orr, Chemist & Druggist 165 Ormeau Road Belfast.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Elizabeth Orr, Student

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

your Petitioner's (2) Brother 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 Elizabeth Orr _____ to the Crichton Royal Institution — and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) William Robert Henry Orr

(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 September, — One thousand nine hundred and five 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, Elizabeth, Orr.
2. Sex and Age,	Female. age 32.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Student.
5. Religious Persuasion, so far as known,	Church of Ireland.
6. Previous Place of Abode,	Bank House, Comber, Co. Down.
7. Place where Found and Examined,	Belfast.
8. Length of time Insane,	nine months.
9. Whether First Attack,	Slightly affected before.
10. Age (if known) on First Attack,	Twenty years.
11. When and where previously under Examination and Treatment (3)	—
12. Duration of Existing Attack,	nine months.
13. Supposed Cause,	Nervousness.
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,	William Robert Henry Orr (Brother) 165 Ormeau Road, Belfast. no.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(3) If patient has previously in an establishment, state name, and 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 five years.

(*To be signed by the party applying*) William Robert Henry Orr

T. & A. C.—May 1905.

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 M. Mackenzie — B
being a (1) Doctor of Medicine of the University
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) 165 Ora
Road, Belfast,
Antrim, in the County
visited and personally examined (4) Mary Elizabeth Orr —
separately from any other Medical Practitione
the said Mary Elizabeth Orr — and tha
is a (5) person
unsound mind — and a proper person to be detaine
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) Very table, u
rable, suspicious, refuses food & m
& is sometimes in a state of stupo

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her mother & two brothers have told
that she threatened her mother & did
slightly injure her & a series of othe
tend to confirm the mother's assertion
& that there was several times uncontrollable

Name and Medical Designation, John M. Mackenzie, M

Place of Abode 73, St. Victoria St., Bel

DATED this 7th day of September, 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, 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) The Crichton
Institution, Dumfries,
Dumfries, — in the County of
visited and personally examined (4) Mary Elizabeth Orr. Student
Bute House, Comber Co. Down, — separately from any other Medical Practitioner,
the said Mary Elizabeth Orr — and that
unsound mind — is a (5) person of
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 morbid
suspicious, very reticent and highly excitable
She is incoherent in her statements, and has
difficulty in understanding even the simplest
questions put to her.

(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, Fred Hugh Clarke M.B.C.

Place of Abode, Charlotte Street Dumfries

DATED this twelfth day of September, 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, 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 Mary Elizabeth Orr, 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 M. Macbormac, M.D.

DATED this 7th day of September, One thousand nine hundred and five 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 Elizabeth Orr, to whom the foregoing Certificate of Emergency refers.

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

Signature and Address W. R. H. Orr 165 Ormeau Road, Belfast.

Date 9th Sept: 1905.

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

I, George Campion, Advocate, (1) Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of William Robert Henry Orr, Druggist, 165 Ormeau Road, Belfast, Certificates under the hands of John M. Macbormac, 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 Mary Elizabeth Orr, Student, Residing, London, Ont., (Parents' Sister) and that the said Mary Elizabeth Orr 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 Mary Elizabeth Orr as a patient into the (3) Public Asylum of Crichton Royal Institution, and I authorize (4) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Elizabeth Orr 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.
(2) Describe him, and if a Pauper, state so.
(2) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(3) Public, District, Parochial, or Private.
(4) His, or her.

DATED [at Dumfries] this Eleventh day of September, One thousand nine hundred and five years.

To the Superintendent of the (3) Public *Asylum of* Crichton Royal Institution, Dumfries.

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

[Signature] Geo: Campion

No. 9455.

Mary Elizabeth Orr.

Adm: 9 September 1905.

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 J. G. N. Boggs, Main Street, Portrush, Ireland:—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Woodney Boggs, —

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

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 Jane Woodney Boggs, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) J. G. N. Boggs

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

DATED this 12th (4) day of September, 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,	Jane Woodney Boggs.
2. Sex and Age,	Female - aged 25 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Lives with relatives.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Portrush.
7. Place where Found and Examined,	do
8. Length of time Insane,	about 4 months.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (3)	never had treatment.
12. Duration of Existing Attack,	about 4 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,	J. G. N. Boggs, Main St Portrush Brother — Insanity never known 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 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 12th day of September, One thousand nine hundred and five.

(To be signed by the party applying) J. G. N. Boggs

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 Potts —
being a (1) Bachelor of medicine &
Ma & Aber University & Fellow
and being in actual practice as a (2) Physician —
do hereby certify, on soul and conscience, that I have this day, at (3) 18 Mu
Portrush, _____ in the Co
Antrim, _____ separately from any other Medical Practi
visited and personally examined (4) Jane Woodley
18 Main St Portrush, _____
the said Jane Boggs, _____ and
_____ is a (5) Lunat
and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Chronic he
Condition for years. At Present. Depr
Incoherent in Speech. Illusions & Dela
Religious melancholic Symptoms.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sleeplessness & Refuses food and
Unmanageable at Times of violence &c

Name and Medical Designation, William Potts

Place of Abode, Portrush

DATED this 6th day of September, One thousa
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, John Gale Creery
being a (1) Bachelor of Medicine, University of
Dublin Physician,
and being in actual practice as a (2)
do hereby certify, on soul and conscience, that I have this day, at (3) 18 Main
Portrush, _____ in the County
Antrim, _____ separately from any other Medical Practitione
visited and personally examined (4) Mrs Jane Woodley Boggs
18 Main St. Portrush, _____
the said Mrs Jane W Boggs _____ and tha
_____ 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) In a low re
depressed state - has Illusions of Hear
Suffers from Melancholia &
Religious Type.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
that she is Sleepless, refuses food,
and Suffers from Auditory Hallucinations.

Name and Medical Designation, J. Gale Creery M.D.
Place of Abode, Riverton Terrace

DATED this 6th day of September, 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,
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 Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) J. W. Boggs, Main Street, Portrush, Ireland, Certificates under the hands of William Porter, and J. Tate Breery, 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 Jane Woodney Boggs, 18 Main Street, Portrush, (Belgian Sister), and that the said Jane Woodney Boggs, is a (5) Lunatic,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Woodney Boggs 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 Jane Woodney Boggs, which accompanied the said Petition.

DATED [at Dumfries] this ~~Thirteenth~~ day of September One thousand nine hundred and five years. 'One word deleted'.

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

[Signature] Geo: Campion

(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.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.

No. 9456.

Jane Woodney Boggs.

Adm: 14 September 1905

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 John Jardine Dunlop Inspector of Poor of the Parish of Mochrum humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Coid or Griffen 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 Coid or Griffen 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.

John J. Dunlop

DATED this Thirteenth (4) day of September One thousand eight hundred and five 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,	Alexander Coid or Griffen
2. Sex and Age,	Male 81 years
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	Porter
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Portwilliam
7. Place where Found and Examined,	Prison of Wigtown
8. Length of time Insane,	weak-minded since childhood
9. Whether First Attack,	do
10. Age (if known) on First Attack,	do
11. When and where previously under Examination and Treatment,	
12. Duration of Existing Attack,	congenital
13. Supposed Cause,	no
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	at times
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Mochrum Parish
18. Date of becoming Chargeable,	1856
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 September One thousand eight hundred and five years.

(*To be signed by Party applying*) John J. Dunlop

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 Arnold Hunter
being a (1) Bachelor of Medicine, Master of Surgery (U
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Prison
Wigtown
Wigtownshire in the County
visited and personally examined (4) separately from any other Medical Practitioner
Portwilliam, Pauper Alexander Coid or Griffin, and th
the said Alexander Coid or Griffin is a (5) person of u
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 obviously f
minded, talks incoherently & weeps & mu
of conversation

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Wm Ewing, Police Sergeant states that prisoner is filthy
habits & has rendered cell in which confined filthy. He a
using obscene language & violent gestures to
Name and Medical Designation, John Arnold Hunter M.A. M.B.
Place of Abode, Deerwood Wigtown
DATED this 12th day of September One thousand eight
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, William Lee Dorall Selby
being a (1) Bachelor of Medicine and Master of Surgery
in the University of Edinburgh
and being in actual practice as a (2) General Medical Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) the Prison
Wigtown
Wigtown in the County of
visited and personally examined (4) separately from any other Medical Practitioner
Alexander Coid or Griffin, Pauper
the said Alexander Coid or Griffin and that
is a (5) person
of unsound 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 a most violent temper, uncontrollable at times
prosecutes very filthy and profane language, and threw
stones at the keeper. Obviously weakminded and incoh
in the middle of conversation. Had seen him eating a
a black mattress torn till his clothes were almost on fire.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Dr. W. L. Houston, Miller, Portwilliam, informed me that he saw Alex
Coid or Griffin clothes on fire twice.
Dr. David Kinnear Brown, Portwilliam, told me that he
Lady and boy being found obscene and profane language
a kind test the Govan Portwilliam and also saw Griffin
his pets & keeper
Name and Medical Designation, Wm Lee Dorall Selby M.B. C.M.
Place of Abode Portwilliam
DATED this 12th day of September One thousand eight
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,
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, Ebenezer Shaw Honorary Sheriff Substitute
of the (3) Sheriffdom of Dumfries and Galloway
having had produced to me, with a Petition at the instance of (4) John Jardine Dunlop
Inspector of Poor of the Parish of Moorbrun
Certificates under the hands of John Arnold Armstrong M.B. C.M. Moffat
and William M'Dowall Selby M.B. C.M. Moffat, 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)
Alexander Reid or Griffin Carpet Weaver Moffat and that the said
Alexander Reid or Griffin 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 Alexander Reid or Griffin as a Patient into the (7) 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 Alexander Reid or Griffin which accompanied the said Petition.

DATED this thirteenth day of September One thousand ~~eight~~ nine hundred and five years

Ebenezer Shaw

To the Superintendent of the Southern Counties Asylum of Dumfries

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

No. 9457.

Alexander Caid of Griffin.

(Cockburn)

Adm: 1st September 1905.

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 ~~Shire~~ & Galloway *and his Substitutes,*— at Dumfries.

The Petition of Hugh Sutton — Inspector of Poor, Kirkbean —

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Crosbie, ~~Inspector of Poor~~ Pauper, —

(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 Crosbie, — to the Crichton Royal Asylum, and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Hugh Sutton

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

DATED this fifteenth (3) day of September, 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,	John Crosbie.
2. Sex and Age,	23 - male -
3. Married, Single, or Widowed,	single.
4. Condition of Life, and previous Occupation (if any),	Labourer.
5. Religious Persuasion, so far as known,	—
6. Previous Place of Abode,	Borgue, Kirkcudbright.
7. Place where Found and Examined,	newmains, Kirkcleam, Dumfries.
8. Length of time Insane,	four days.
9. Whether First Attack,	—
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (4)	—
12. Duration of Existing Attack,	four days.
13. Supposed Cause,	—
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,	~~Kirkbean~~ Kirkbean 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,	James Crosbie - (Father) Lennox Plunton, Borgue -
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

(4) If patient has been previously in an Establishment, state when, and date of latest Admission or Application thereto. If never previously under Asylum or Treatment, state that 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 five.

(To be signed by the party applying) Hugh Sutton
Inspt of Poor.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Matthew Cameron,
being a (1) M.B.C.M. of 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) Newm
-Kirkbean
Kirkcudbright, — in the County
visited and personally examined (4) John Crosbie, — separately from any other Medical Practitio
the said John Crosbie, — and t
unsound mind, — is a (5) person of
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)
Wild restless look. Incoherent talk
imagines he has had a row. insane ac
such as going round a cow in the field
and cooking it with kale. taking them off a
reading Bible round & round twenty times a week.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Has been restless for four days. Wandering ab
and unable to concentrate his attention on his
Last night paraded up & down road all nigh
And ran round a field twice or three times - Could
all the Hymns he could get & sing them

Name and Medical Designation, Matthew Cameron M

Place of Abode, Mainsriddle

DATED this fifteenth day of September One thousa
nine hundred and five.

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

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

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

(4) *Insert 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.*

Thomas Sloan. Newmains Kirkbean Employer reports to me.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Patrick M. 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) 33 Castle St
Dumfries, in the County of
Dumfries, — separately from any other Medical Practitioner,
visited and personally examined (4) Matthew Cameron Physi
John Crosbie Pauper
the said Matthew Cameron, — and that
Crosbie
unsound mind, — is a (5) person of
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 depression
hesitancy of speech - speech not
rational - questions asked from the com
tion - Says people want to murder

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr. R. Sutton told me he saw him
way to the Mill Pond. Attempt

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

Place of Abode, Dumfries

DATED this 15th day of September One thousand
nine hundred and

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

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

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

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

(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.D.C.M. University of Glasgow, Newmains, Kirkcaldy
hereby certify, on soul and conscience, that I have this day, at (2) Newmains, Kirkcaldy
in the County of Kirkcudbright —, seen and personally examined John Crosbie,
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.

Matthew Cameron

DATED this fifteenth day of September, 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 Asylum
Asylum to receive therein John Crosbie,
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Hugh Fulton Kirkbean
Date 15th Sept. 1905.

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

I, ~~George Sutherland Jackson Esquire, Advocate~~ (4) Sheriff Substitute, of ~~the~~ (5) Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (6) Hugh Fulton, Inspector of Poor, Kirkbean, Dumfries,
Certificates under the hands of Matthew Cameron,
and Patrick M. 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 (7) John Crosbie Newmains, Kirkbean, (a pauper) and that the said John Crosbie, 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 John Crosbie as a patient into the (9) Public Asylum of Crichton Royal 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 John Crosbie, 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 Eighteenth day of September One thousand nine hundred and five appears. — Five words deleted —

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

[*Signature*] Geo. Sutherland C.

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

No. 9458.

John Crosbie.

(Kirkbean)

Admn: 15 September 1965.

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 William Clarke Inspector of Poor, Lochmaben humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet McCreadie, 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 McCreadie 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) William Clarke

(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 September 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,	Janet McCreadie
2. Sex and Age,	Female 76 years
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Farm Manager's widow
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Whitelaird, Lochmaben
7. Place where Found and Examined,	Whitelaird
8. Length of time Insane,	Six weeks
9. Whether First Attack,	first
10. Age (if known) on First Attack,	—
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Six 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,	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,	Mrs Graham, Whitelaird, or David Hutchieson Cranberry, Kirkpatrick Fleming Nephew not 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 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 September — One thousand nine hundred and Five

(To be signed by the party applying) William Clarke

P. P.

. & A. C.—August 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, Norman Reid
being a (1) Doctor of Medicine of Glasgow Univer
and being in actual practice as a (2) General Medical Practi
do hereby certify, on soul and conscience, that I have this day, at (3) White
Dumfries
in the Co
visited and personally examined (4) Janet McCreadie, Whitel
Lochmaben, Pauper.
separately from any other Medical Practiti
the said Janet McCreadie — is a (5) person
unsound mind — and
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She has a ste
vacant look and scarcely understands wha
said to her. She says she is at Holdsworth and
there was a great fire in her home. all of which
delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Graham her niece says that they can hea
control her in her at times, that she imagines
going to some funeral or some duty that she has to
and can scarcely be kept from the fire at night

Name and Medical Designation, Norman Reid M.

Place of Abode, Lochmaben

DATED this 11th day of September One thousa
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.*

(6) *State the facts.*

I, the undersigned, Archibald George Sanders
being a (1) Bachelor of Medicine 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) White
Lochmaben
Dumfries
in the County of
visited and personally examined (4) Janet McCreadie
separately from any other Medical Practitioner
White Laird, Lochmaben, Pauper
the said Janet McCreadie — is a (5) person of
unsound mind — and the
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
depressed melancholy appearance, can not sit
when she is spoken to whispers. Says she
is grieving for her father's funeral which she attended
over a week ago, 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)
Her nephew in Law Mr Graham informs me she shouts at
night and that she wanders about the room imagining
she is putting things right and is much troubled about
fire when she thinks imaginary articles get lost.

Name and Medical Designation, Archibald George Sanders M.B.

Place of Abode, Lochmaben

DATED this tenth day of September 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,
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, Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) William Clarke, Inspector of Poor, Lochmaben, Certificates under the hands of Thomas Reid, , and Archibald George 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 (4) Janet McBreadie, Whitelaird, Lochmaben. (Pauper) and that the said Janet McBreadie 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 Janet McBreadie 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 Janet McBreadie 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 September, One thousand nine hundred and five years.

To the Superintendent of the (7) Public Asylum of Southern Counties, Dumfries.

[Signature] Geo. Campion

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

No. 9459.

Janet McCreadie.

(Lochaber)

Adm: 15 September 1905

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 Mrs. Mary Niven, "Aguilas", Neston, Cheshire,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Hart Niven, 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 Isabella Hart Niven 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*) Mary Niven

(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 September, — One thousand nine hundred and five 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 Hart Niven.
2. Sex and Age,	Female - fifty one years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Of independent means.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	Bearforth, Liverpool.
7. Place where Found and Examined,	59 Mount Road, Higher Tranmere, Birkenhead.
8. Length of time Insane,	about twelve months.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack.	as above.
11. When and where previously under Examination and Treatment (5)	Not previously under Examination or Treatment.
12. Duration of Existing Attack,	about twelve months.
13. Supposed Cause,	nervous 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,	Neston
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,	Capt.n William Niven. "Aguilas" Neston, Cheshire. Brother - no other member.
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 date thereto. If not previously under examination or treatment, the fact.

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

DATED this Sixteenth day of September One thousand nine hundred and five years.

(*To be signed by the party applying*) Mary Niven

P. p.

F. & A. C.—May 1905.

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 Howieson Anderson M.B. C.M.
being a (1) Physician 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) no 59 Mount Road, Higher Tranmere, Birkenhead, in the County of Cheshire, separately from any other Medical Practitioner, visited and personally examined (4) Isabella Hart Niven, Spinster, 59 Mount Road, Higher Tranmere, Birkenhead, and that the said Isabella Hart Niven, is a (5) Person of unsound 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 the delusion that she is a Criminal, & has Poisoned many persons & that she ought to give herself up to the Police.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her sister-in-law, Mrs Niven, & her housekeeper Mary McDonald say she is constantly saying the same things as above to them.

Name and Medical Designation, Wm H. Anderson M.B. C.M.

Place of Abode 63 North Road, Birkenhead

DATED this Twelfth day of September, 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, Peter Murray Kerr
being a (1) Bachelor of Medicine Master in Surgery 4th 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) Cruckton Royal Institution, Shrewsbury in the County of Salop, separately from any other Medical Practitioner, visited and personally examined (4) Isabella Hart Niven, Spinster 59 Mount Road Higher Tranmere Birkenhead, and that the said Isabella Hart Niven, is a (5) person of unsound 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 appearance and manner she is very depressed Suicidal she believes that she has poisoned hundreds of people & that she should be hanged for 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, Peter Murray Kerr M.B.

Place of Abode, 25 Castle Street Shrewsbury

DATED this Seventeenth day of September, One thousand nine 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, William Howieson Anderson
being (1) a Bachelor of Medicine, (Univ. Glasgow)
hereby certify, on soul and conscience, that I have this day, at (2) Higher Tranmere, Birkenhead,
in the County of Cheshire, seen and personally examined
Isabella Hart Niven, 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.

Wm H. Anderson

DATED this Twelfth day of September, 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 Isabella Hart Niven,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister-in-law

Signature and Address Mary Niven Aguilas Rector Cheshire

Date 16th September 1905.

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

I, George Campion 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 Mary
Niven, "Aguilas", Rector, Cheshire,
Certificates under the hands of William Howieson Anderson,
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) Isabella Hart Niven, 59 Mount Road Higher Tranmere Birkenhead, Sister-in-Law and that the said
Isabella Hart 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 Isabella Hart Niven as a patient into the (5) Public Asylum of Crichton Royal Institution and I authorize (6) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Hart 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.
(6) His, or her.

DATED [at Dumfries,] this Eighteenth day of September, One thousand nine hundred and five years.

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

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

[*Signature*] Geo. Campion

No. 9460.

Isabella Hart Niven.

Adm: 16 September 1905.

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) Dumfries and Galloway, and his Substitutes, at Dumfries.

The Petition of William Copland Inspector of Poor, Kirkgunzeon.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ellen Dalziel, 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 Ellen Dalziel, to the Crichton Royal Asylum, Dumfries, and to sanction her admission into the said Asylum.

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

William Copland

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

DATED this eighteenth day of (3) September, 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 Ellen Dalziel.
2. Sex and Age,	35 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,	Haugh of Urr.
7. Place where Found and Examined,	Damcroft, Alleyford, Kirkgunzeon.
8. Length of time Insane,	
9. Whether First Attack,	First Attack.
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment,	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	not Known.
15. Whether Suicidal,	—
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkgunzeon.
18. Date of becoming Chargeable,	18th Sept 1905.
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,	Thomas Dalziel, Damcroft, Alleyford, Kirkgunzeon. Brother.
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 eighteenth day of September, One thousand ~~eight~~ nine hundred and five.

(*To be signed by Party applying*) William Copland Insp. of Poor

P. P.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Samuel Archibald David Gillespie —
being a (1) Bachelor of Medicine & Master in Surgery,
Edinr. 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) Dampool,
Allerford, Kirkcudbright, —
Kirkcudbright, — in the County
visited and personally examined (4) Mary Allen Dalziel —
separately from any other Medical Practitioner,
the said Mary Allen Dalziel — and that
— is a (5) person of
unsound 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)
Seems quite depressed in spirits at present - thinks
she will never be able to work again - Answers all
questions when she is with me - Does not seem to
have reasoning power at times talks very sensibly
however, fluctuates.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Brown (an attendant) of Thomas Dalziel (brother)
says she has been out all night two or three times
and was found once in a suicidal attitude at the
side of a deep pond a mile or two distant - She is very
cut and does not sleep at all well - She says she
has been very quiet mentally for some considerable

Name and Medical Designation, Samuel Archd David Gillespie
M.B. Edinr. Chb.

Place of Abode, Dalbeattie

DATED this seventeenth day of September, One thousand nine
hundred and five.

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

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

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

(4) *Insert 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, Robert M'Tinder MB & Chm. —
being a (1) Fellow of Edinburgh University, —
and being in actual practice as a (2) General Practitioner —
hereby certify, on soul and conscience, that I have this day, at (3) Dalmorton,
Mayfield. Kirkcudbright. . . . in the County of
Kirkcudbright. . separately from any other Medical Practitioner,
visited and personally examined (4) Mary Allen Dalziell. .
Dampool,
the said Mary Allen Dalziell, . . . and that
— is a (5) person of
unsound 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 anxious
& depressed, maintains an obstinate silence
regarding her health. Gives way to emotional
bouts of crying.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mary Brown (an attendant) tells me she has been
unstable in character for some years. Has also
Chronic relapsing Dyspepsia & Constipation. That
She has taken to wandering away from home without Cause.

Name and Medical Designation, R. M'Tinder MB & Chm

Place of Abode, Dalbeattie

DATED this Eighteenth day of September, One thousand nine
hundred and five. —

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

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

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

(4) *Insert 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.*

No. 1.

CERTIFICATE OF EMERGENCY.

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

I, the undersigned, Robert M'Kerchar MB, [illegible]
being (1) Fellow of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries
in the County of Kirkcudbright, seen and personally examined
Mary Ellen Dalgiel, 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.

R. M'Kerchar MB

DATED this Fifteenth day of September [illegible]

(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 Ellen Dalgiel
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address William Copland, Bankend, Kirkgunzeon.

Date 18th September 1905.

[illegible] and Robert M'Kerchar, 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 Mary Ellen Dalgiel, Dalcraft, Dalgarford, Kirkgunzeon, (Pauper), and that the said Mary Ellen Dalgiel, is (3) (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 Ellen Dalgiel 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 Mary Ellen Dalgiel which accompanied the said Petition.

DATED this Nineteenth day of September, One thousand ~~eight~~ nine hundred and and five years.

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

Geo Lawson

(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, Samuel Archibald David Gillespie, being a (1) Bachelor of Medicine & Master in Surgery, 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) Dampfyll, Alleyford, Kirkgunzeon, Kirkcudbright, in the County of Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Mary Ellen Dalziel, and that the said Mary Ellen Dalziel is a (5) person of unsound 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)

[redacted]

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 M'Kinnel M'Bain, being a (1) Graduate of Edinburgh University, and being in actual practice as a (2) General Practitioner, hereby certify, on soul and conscience, that I have this day, at (3) Dalmorth, Alleyford, Kirkgunzeon, Kirkcudbright, separately from any other Medical Practitioner, visited and personally examined (4) Mary Ellen Dalziell, Pauper, the said Mary Ellen Dalziell, is a (5) person of unsound 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) Looks suspicious & depressed, maintains an obstinate silence regarding her health. Given way to emotional bouts of crying.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mary Brown (an attendant) tells me she has been excitable in character for some years. That she claims a direction in domestic Economy. That she has taken to wandering away from home without Cause.

Name and Medical Designation, R. M'Kinnel M'Bain M.B. & Ch.

Place of Abode, Dalbeattie

DATED this Eighteenth day of September 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, Robert M'Kerchar MB, Edin
being (1) Graduate of Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries
in the County of Kirkcudbright, seen and personally examined
Mary Ellen Dalziel, 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.

R. M'Kerchar MB

DATED this Eighteenth day of September One thousand eight hundred and five.—

(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, Advocate, Sheriff Substitute
of Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of William Copland,
Inspector of Poor, Kirkgunzeon
Certificates under the hands of Samuel Archibald & David Gillespie,
and Robert M'Kerchar, ———, 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 Mary
Ellen Dalziel Duncraft Alleyford Kirkgunzeon, (Pauper) and that the said
Mary Ellen Dalziel 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 Mary Ellen Dalziel as a Patient into the (4) 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 Ellen Dalziel which accompanied the said Petition.

DATED this Nineteenth day of September, One thousand ~~eight~~ nine hundred and and five years.—

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

Geo Sampson

(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. 9461.

Mary Ellen Dalgiel.

(Kirkpunzeon)

Adm: 18 September 1905.

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. Juanita Constance Atkinson, 11 Willowbank Street, Belfast:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that James Atkinson, 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 Atkinson —— 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*) Juanita Constance Atkinson

(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 September, One thousand nine hundred and five 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 Atkinson.
2. Sex and Age,	Male. 49.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Postal Telegraph Official.
5. Religious Persuasion, so far as known,	Church of Ireland.
6. Previous Place of Abode,	11 Willowbank St. Belfast.
7. Place where Found and Examined,	ditto
8. Length of time Insane,	Coming on for past year.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	——
11. When and where previously under Examination and Treatment (5)	Not previously
12. Duration of Existing Attack,	More or less during past year.
13. Supposed Cause,	Not known.
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,	Juanita Constance Atkinson, 11 Willowbank St. Belfast. — Wife — None.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	——

(5) If Patient has been previously in an Asylum, state when, and date of latest admission or approximation 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 Nineteenth day of September, One thousand nine hundred and five years.

(*To be signed by the party applying*) Juanita Constance Atkinson

T. & A. C.—May 1905.

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 Johnston Austin
being a (1) Doctor of Medicine Royal 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 Willowbank
Belfast
Antrim
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) James Atkinson,
11 Willowbank St Belfast
and that the said James Atkinson is a (5) Person of
unsound 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 been
depressed in spirits for several months
thinks the outside world "dead & lifeless"; has
sleeping badly, says if this terrible depression
might cannot be removed he will do something
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife informs me that he is at times very
to manage. That he has been trying to purchase
a revolver and has had dangerous weapons
secretly.

Name and Medical Designation, J. J. Austin M.D.

Place of Abode, 7 Clifton Street Belfast

DATED this seventeenth day of September, 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.

(6) *State the facts.*

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

I, the undersigned, Wharton Browne
being a (1) B.A. M.B. M.R.C.P. Edy.
and being in actual practice as a (2) Surgeon
do hereby certify, on soul and conscience, that I have this day, at (3) 11 Willow Bank
Carlton
in the County of Ant
separately from any other Medical Practitioner,
visited and personally examined (4) James Atkinson, Telegraph
at 11 Willow Bank St. Belfast,
and that
the said James Atkinson, is a (5) 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)
Mental hallucinations. Talks a lot
of nonsense about his position in
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
From all I can learn he has con
Suicidal intentions.

Name and Medical Designation, Wharton Browne L

Place of Abode, 10 College Sq N. Belfast

DATED this 18 Sept day of One thousand
nine hundred and 5.

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 Johnston Austin
being (1) a Medical Doctor
hereby certify, on soul and conscience, that I have this day, at (2) 11 Willowbank St Belfast,
in the County of Antrim, seen and personally examined James Atkinson, 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. Johnston Austin MD

DATED this Seventeenth day of September, 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 Dumfries
~~Asylum~~ to receive therein James Atkinson,
to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Jeanie Cochrane Atkinson 11 Willowbank St Belfast

Date 19th Sept: 1905.

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

I, George Campion, 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 Jeanie Cochrane Atkinson, 11 Willowbank Street, Belfast,
Certificates under the hands of John Johnston Austin,
and J. Walton Browne, 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 Atkinson, 11 Willowbank Street, Belfast, (Petrs Husband) and that the said James Atkinson, is a (5) person of unsound mind, of unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Atkinson as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize (7) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Atkinson 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.
(7) His, or her.

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

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

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

[Signature] Geo. Campion

No. 9462.

James Atkinson.

Adm: 19 September 1905.

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) Dumfries & Galloway, ——— *and his Substitutes,*— at Dumfries.

The Petition of Mrs. Wilhelmina Stewart, 1 Thorndale Avenue, Belfast.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Lynn Stewart, your Petitioner's (2) 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 Thomas Lynn Stewart, — 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) Wilhelmina Stewart

(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 September, One thousand nine hundred and five 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 Lynn Stewart.
2. Sex and Age,	Male - 39 years.
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,	1 Thorndale Avenue. Belfast.
7. Place where Found and Examined,	Crichton Royal Inst^n. Dumfries.
8. Length of time Insane,	3 years.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	36
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution as Voluntary Patient.
12. Duration of Existing Attack,	3 years.
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,	———
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 Stewart. (Wife) 1 Thorndale Avenue. Belfast.
19. 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 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 Eighteenth day of September, One thousand nine hundred and five years.

(To be signed by the party applying) Wilhelmina Stewart

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 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) Crichton Royal Institution, Dumfries,
in the County of
visited and personally examined (4) Thomas Lynn Stewart Gentleman, 1 Thorndale Avenue, Belfast,
the said Thomas Lynn 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)
His insane appearance and manner. He has delusions believing that he has magnets, lies and worms in his clothes and bed. Refuses his food because his duty.

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 twentieth day of September, One thousand nine hundred and five 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, James Smith Gray,
being a (1) Bachelor of Medicine, and Bachelor of Surgery of the University of Aberdeen,
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
visited and personally examined (4) Thomas Lynn Stewart Gentleman, 1 Thorndale Avenue, Belfast,
the said Thomas Lynn 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)
His insane manner and appearance. Refuses to answer questions. He has delusions as to there being all manner of crawling things about him, & that he has great objections to anyone walking in his bedroom with boots on.

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

Name and Medical Designation, James Smith Gray M.A. M.B.
Place of Abode, 20 Castle Street Dumfries
DATED this eighteenth day of September, One thousand nine 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,
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 Sampson, Advocate, Sheriff Substitute (1) of the (2) Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of Mrs Wilhelmina Stewart, 1 Thorndale Avenue, Belfast, Certificates under the hands of Peter Murray Kerr, and James Smith Gray, 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 Lynn Stewart, Thorndale Avenue, Belfast, (Petr's Husband) and that the said Thomas Lynn 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 Thomas Lynn Stewart 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 Thomas Lynn 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 Dumfries] this Eighteenth day of September, One thousand nine hundred and five years.

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

[Signature] Geo: Sampson

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

No. 9463.

Thomas Lynn Stewart.

Adm: 19 September 1905.

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 Edward Henshaw~~ Frances Mary Henshaw, ———

7 London Grove, Liverpool,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that ——— Bryan Henshaw, ———

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

your Petitioner's (3) son Bryan Henshaw, ——— 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 Bryan Henshaw, ——— to the Crichton Royal Institution, —and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Frances Mary Henshaw

(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 September, One thousand nine hundred and five 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,	Bryan Henshaw.
2. Sex and Age,	Male – 21 years 11 months.
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,	7 London Grove, Liverpool.
7. Place where Found and Examined,	63 Rodney Street, Liverpool.
8. Length of time Insane,	Three months.
9. Whether First Attack,	First attack.
10. Age (if known) on First Attack,	21 years 8 months.
11. When and where previously under Examination and Treatment (5)	Not under treatment before.
12. Duration of Existing Attack,	Three months.
13. Supposed Cause,	Cause not known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Has threatened suicide.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	~~Toxteth Park, Liverpool~~.
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 Edward Henshaw; Father. Frances Mary Henshaw; Mother. An Aunt of the patient committed suicide.
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; approximate if not sure thereto. If patient has previously been under Examination or Treatment, state where.

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

DATED this Fourteenth day of September, One thousand nine hundred and five years.

(To be signed by the party applying) Frances Mary Henshaw

T. & A. C.—May 1905. 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 Savile Henderson being a (1) M.B. C.S.E. (Oxf.) L.R.C.P. (Lond.) etc. Bachelor of Medicine of Victoria University and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 7. London Grove, Liverpool, in the County of Lancaster, separately from any other Medical Practitioner, visited and personally examined (4) Bryan Henshaw and that the said Bryan Henshaw is a (5) person of unsound 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. Patient considers that his health is enfeebled owing to serious self pollu
2. Patient has been listless & worried & completely changed manner during the p few months.
3. He believes everybody is talking about him

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

1. From his father:- Bryan Henshaw after h he was going out to be shaved, took h to Derby!

Name and Medical Designation, W. Savile Henderson. M

Place of Abode. 63. Rodney St. Liverp

Dated this Eleventh day of September, 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.

(6) *State the facts.*

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

I, the undersigned, Arthur Richard Hopper being a (1) Doctor of Medicine of the University of St. Andrews and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) 63 Rodney St Liverpool, in the County of Lancashire, separately from any other Medical Practitioner, visited and personally examined (4) Bryan Hushaw, and that the said Bryan Hushaw is a (5) person of unsound 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 stayed at my house a country for a few days and went out in the morning & sat behind a hedge till morning. He to me he had tried to hang himself with his pocket-handkerchief on that occasion. He constantly told me about people following him & cars, shouting after him in the st though his parents have failed to find evidence of this. Says he cannot think what and feels confused in his brain, because of uneasiness in the past. He says suicide was in

2. Other facts (if any) indicating Insanity communicated to me by others: (7) when he went to Derby His father tells me he has twice disappeared from home for many ho Once going off to Derby by train. He says the boy is moody & depressed though sometim laughing hysterically.

Name and Medical Designation, Arthur Richard Hopper. M.D

Place of Abode, 63 Rodney Street Liverpool

Dated this Eleventh day of September, 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,
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 Lampion, 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) Francis Mary Henshaw, 7 London Grove, Liverpool,
Certificates under the hands of William Savile Henderson,
and Arthur Richard Hopper — 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)
Bryan Henshaw, 7 London Grove, Liverpool, (Private Asylum) and that the said
Bryan Henshaw, 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 Bryan Henshaw as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Bryan Henshaw, 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.
(7) His, or her.

DATED [at Dumfries] this Thirteenth day of September, One thousand nine hundred and five years.

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

[Signature] Geo. Lampion

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

No. 9464.

Bryan Henshaw.

Adm: 19 September 1905.

34 & 35 VICTORIA, CAP. 55. SEC. 6.

PETITION to the SHERIFF to grant order for the reception of James Milliken a Prisoner in H.M. Prison Dumfries, — into the Asylum at Crichton Royal Institution, Dumfries.

UNTO the HONOURABLE the SHERIFF of the County of Dumfries Galloway, and his Substitutes.

The PETITION of William Bedlington Douglas, Governor of H.M Prison Dumfries, as representing The Prison Commissioners for Scotland, incorporated under the Prisons (Scotland) Act, 1877, administrators of said Prison.

Humbly Sheweth,

Vict. cap. 55, Sec. That by Section 6 of the Criminal and Dangerous Lunatics (Scotland) Amendment Act, 1871, it is provided that "When in relation to any person confined in a "local prison in terms of the 'Prisons (Scotland) Administration Act, 1860,' it is "certified, on soul and conscience, by two medical persons that they have visited and "examined such prisoner, and that in their opinion he is insane, it shall be lawful "for the Sheriff, on summary application at the instance of the administrators of "such Prison, by a warrant under his hand, to order such prisoner to be removed to a "lunatic asylum," and that it appears from the appended Medical Certificates by two Medical Persons that James milliken, presently confined in H.M Prison Dumfries, is insane.

May it therefore please your Lordship by a Warrant under your hand to order the said James Milliken, to be removed from H.M Prison Dumfries to the Lunatic Asylum at Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

W. B. Douglas

Governor H.M *Prison* Dumfries.

Dated this Nineteenth day of September, Nineteen Hundred and five years.

M & G Ltd—120—5/05 27 a

STATEMENT OF PARTICULARS REGARDING PRISONER.

(If any of the particulars are not known, the fact to be so stated.)

1. Prisoner's Reg. No., Name, and Age, ... 05. 544 James Milliken
2. Whether Married, Single, or Widowed, ... not known
3. Date when first received into Prison, ... 15 Sept 1905.
4. By what Court committed (if untried), ...
5. Date of sentence, and by what Court (if convicted). 15/9/05 Police Ct and
6. Offence, ... Drunk & Incapable
7. Length of sentence, ... 14 days or 10/6
8. Date of expiration of sentence,* ... ... 29th Sept 1905
9. Condition of life, and previous occupation. ... designed in Warrant of Imp as a Mason.
10. Previous place of abode, ...
11. Length of time insane, ...
12. Whether first attack, ...
13. Age (if known) on first attack, ...
14. If Prisoner has been previously in an Asylum, state fact and date of latest admission, with name of Asylum, ...
15. Duration of existing attack, ... Not known.
16. Supposed cause, ...
17. Whether subject to epilepsy, ...
18. Whether suicidal, ...
19. Whether dangerous to others, ...
20. Name and residence of nearest known relative, and degree of relationship, ...
21. Is any member of the family known to be, or have been, insane, ...
22. Special circumstances (if any) preventing the insertion of any of the above particulars.... ... Prisoner is unfit to give any rat account of himself or his movement

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

H. B. Douglas Governor

Prison of Dumfries,

19 Sept. 1905.

* NOTE.—The authority for detention given under this Warrant ceases on expiration of sentence.

MEDICAL CERTIFICATE, No. 1.

I, the undersigned, Joseph Hunter

being a[1] Bachelor of Medicine and Surgery. 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 H.M. Prison Dumfries

in the County of Kirkcudbright,

separately from any other Medical Practitioner, visited and personally examined[3]

James Milliken, prisoner.

and that the said James Milliken, is a[4] person of unsound 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:[5] He is incoherent in all his statements - can give no account of his home or surroundings - fails to grasp the meaning of any question - cannot concentrate his attention - answers absurdly - takes little food - lies down all day - takes no interest in anything about him.

2. Other facts (if any) indicating Insanity communicated to me by others:[6]

Warder Fraser H. M. Prison, informs me that his mental condition does not vary at any time.

Name and Medical Designation, Joseph Hunter.

Place of Abode, 31 Castle St Dumfries.

Dated this seventeenth day of September, One Thousand Nine Hundred and five. Years.

MEDICAL CERTIFICATE, No. 2.

I, the undersigned, John Dewar Robson

being a[1] Bachelor of Medicine & Member 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 H.M. Prison Dumfries

in the County of Kirkcudbright Stewartry

separately from any other Medical Practitioner, visited and personally examined[3]

James Milliken. prisoner

and that the said James Milliken prisoner is a[4] person of unsound 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:[5]

He is absolutely incoherent in speech. Has lost memory & is incapable of giving any account of his antecedent career or himself.

2. Other facts (if any) indicating Insanity communicated to me by others:[6]

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

Place of Abode, Hospital Lane Maxwelltown

Dated this eighteenth day of September, One Thousand Nine Hundred and five.

(*Place*) Dumfries,

(*Date*) 19th September 1905.

THE Sheriff having considered the foregoing Petition, with relative Medical Certificates affixed, hereby grants Warrant for the removal of James Milliken from the Prison of Dumfries to the Crichton Royal Asylum. at Dumfries.-

(*Signature*) Geo: Lauchlan

No. 9465.
James Milliken.
Adm: 19 September 1905.

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 Andrew S. Gopleu, 130 Gidlow Lane, Wigan.

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Newall or Gopleu, 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 Janet Newall or Gopleu, 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) Andrew S. Gopleu

(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 September, One thousand nine hundred and five 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 Gopleu.
2. Sex and Age,	Female. - 28 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,	130 Gidlow Lane. Wigan. - Dumfries.
7. Place where Found and Examined,	5 months.
8. Length of time Insane,	No.
9. Whether First Attack,	25 years.
10. Age (if known) on First Attack,	Crichton Royal Institution. 1902. 5 months.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	No.
13. Supposed Cause,	Yes.
14. Whether subject to Epilepsy,	Yes.
15. Whether Suicidal,	—
16. Whether Dangerous to others,	Andrew S. Gopleu (Husband) 130 Gidlow Lane. Wigan. John Newall. 18 McClelland St. Dumfries. Father.—
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,	
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If Patient has been previously in an Asylum, state the name, and date of latest admission or approximation thereto. If never 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 first day of September, One thousand nine hundred and five years.

(To be signed by the party applying) Andrew S. Gopleu

T. & A. C.—Sept. 1903.

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, Peter Murray Kerr
being a (1) Bachelor of Medicine & Master in Surgery of the University of Glasgow
and being in actual practice as a (2) Medical Practitioner
do hereby certify, on soul and conscience, that I have this day, at (3) 18 McLellan Street Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Janet Newall or Goplen, Housewife 18 McLellan Street Dumfries, and that the said Janet Newall or Goplen is a (5) person of unsound 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 somnolent, mildly maniacal; Nurses herself back upon the floor Breaks dishes; snatches her relatives Speech 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, Peter Murray Kerr M.B.

Place of Abode, 20 Castle Street Dumfries

DATED this twentieth day of September, One thousand nine hundred and five 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, Frederick Hugh Clarke
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) The Crichton Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Janet Newall or Goplen Housewife. 18 McLellan Street. Dumfries, and that the said Janet Newall or Goplen is a (5) person of unsound 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 Says voices whisper all manner of things in her ears. e.g. Swear, and tell her the motives of her friends are of the basest sort. She is generally miserable, and can take 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, Fred: Hugh Clarke M.B.C.M.

Place of Abode, Crichton Royal Institution Dumfries

DATED this twenty second day of September, One thousand nine 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, Peter Murray Kerr, ——— being (1) Graduate of Medicine, ——— hereby certify, on soul and conscience, that I have this day, at (2) 18 McClelland St in the County of Dumfries, seen and personally examined Janet Newall or Goplen, ———, 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 fourteenth day of September, One thousand nine hundred and five 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 Goplen ——— to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Andrew S. Goplen

Date 21st Sept: 1905.

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

I, George Campion, Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of Andrew S. Goplen, 130 Gidlow Lane, Wigan, ——— Certificates under the hands of Peter Murray Kerr ——— 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 Janet Newall or Goplen, 130 Gidlow Lane, Wigan (Petns: Wife) and that the said Janett Newall or Goplen, is (2) 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 Goplen, as a Patient into the Public Asylum of Crichton Royal Institution and I authorize Kerr Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Newall or Goplen, ——— 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 third day of September, One thousand nine hundred and five years.

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

Geo. Campion
[Signature]

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

No. 9d 66.

Janet Newall or Gopsill

Adm: 21 September 1905.

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, Tolbooth and his Substitutes,—at Dumfries.

The Petition of Wm Lawson, Pleasance House, Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Lawson, ~~daughter~~ ~~Wm Lawson~~ 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 Margaret Lawson, to the Dumfries Royal Asylum, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Wm Lawson

(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 September, 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,	~~Wm Lawson~~ Margaret Lawson.
2. Sex and Age,	~~Father 66 years old~~ Female 36 years.
3. Married, Single, or Widowed,	~~Married~~ Single.
4. Condition of Life, and previous Occupation (if any),	~~Engaged~~, daughter.
5. Religious Persuasion, so far as known,	~~Protestant~~ Member of St Mary's D.f.s.
6. Previous Place of Abode,	Pleasance House, D.f.s.
7. Place where Found and Examined,	Pleasance House
8. Length of time Insane,	Shortly. — About one Month.
9. Whether First Attack,	1st —
10. Age (if known) on First Attack,	36 years —
11. When and where previously under Examination and Treatment (5)	Dumfries — Dr. Grieve.
12. Duration of Existing Attack,	Shortly — One month.
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,	Wm Lawson — Father — Pleasance House Dumfries. 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 and date of latest admission or approbation thereto. If not previously under Asylum or treatment, state the fact.

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

DATED this 22nd day of Septr. — One thousand nine hundred and five.

(To be signed by the party applying) Wm Lawson

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, Walter Duncan Irvine, being a (1) Bachelor of Medicine & Master in Surgery of Edinburgh University, and being in actual practice as a (2) Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) Dumfries Royal Infirmary, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner visited and personally examined (4) Margaret Lawson, Spinster, Pleasance House, Dumfries, and the said Margaret 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 is sleepless refuses food, is dirty in her habits. Has delusions: e.g. Has committed sin for which her blood has been congealed; is inhabited by devils: is in hell—

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

Name and Medical Designation, W. D. Irvine M.B. Cant.

Place of Abode, Dumfries.

DATED this twenty third day of September, 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.

(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) The Dfs: Royal Infirmary, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Margaret Lawson, Spinster, Pleasance House, Dumfries, and that the said Margaret 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 suffers from delusions. e.g. Says she cannot speak, or does food, and has tumours in various parts of the body. all of which I know to be delusions

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

Name and Medical Designation, Frederick Hugh Clarke, M.B.

Place of Abode, Charlotte Street Dumfries.

DATED this twenty third day of September, One thousand nine 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, Frederick Hugh Clarke
being (1) Graduate in Medicine of Glasgow University
hereby certify, on soul and conscience, that I have this day, at (2) Dp: Royal Infirmary
in the County of Dumfries, seen and personally examined
Margaret Lawson, Pleasance House, Dfs:—, 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.

Fred: Hugh Clarke M.B.C.M.

DATED this Twenty Third day of September, One thousand nine hundred and five 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 Lawson,
to whom the foregoing Certificate of Emergency refers.—

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

Signature and Address Wm Lawson Pleasance House Dfs

Date 23rd September 1905.

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

I George Lampson (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) William
Lawson, Pleasance House, Dumfries,
Certificates under the hands of Walter Duncan Grieve,
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) Margaret
Lawson, Pleasance House, Dumfries, (Petr's Daughter), and that the said
Margaret 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 Margaret 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 Margaret 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 Twenty-fifth day of September, One thousand nine hundred and five years.

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

[*Signature*] Geo: Lampson

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

No. 9464.

Margaret Lawson.

Adm: 28 September 1905.

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 ~~Stewartry~~ Dumfries & Galloway and his Substitutes, at Dumfries.

The Petition of Francis Dodds, Inspector of Poor, Morton, Dumfriesshire.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Kinnon, 32 Glasgow Street, Maxwelltown,

(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 John Kinnon to the Crichton Royal Institution, Dumfries and to sanction his admission into the said Asylum.

(To be signed by the Party applying) Francis Dodds

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

DATED this Twenty-sixth (3) day of September One thousand nine hundred and five 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 Kinnon.
2. Sex and Age,	Male.- 25.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Gardener.
5. Religious Persuasion, so far as known,	Not known.
6. Previous Place of Abode,	32 Glasgow Street, Maxwelltown.
7. Place where Found and Examined,	~~Lodged~~ from Police in Stronhill, examined at Crichton Royal Institution, Dumfries.
8. Length of time Insane,	Not known
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	25.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	Not known.
13. Supposed Cause,	"
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,	Morton 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,	John Kinnon, Bowling Green Keeper, 32 Glasgow Street, Maxwelltown. A brother Thomas.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

(5) If patient has been previously in an Asylum, Hospital, or Licensed House, state the name of it, and date of latest admission; and if any application was made thereto. If patient was previously under Medical Certification or treatment, state the fact.

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

DATED this Twenty-sixth day of September One thousand nine hundred and five years.

(To be signed by the party applying) Francis Dodds

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Thomas Ferguson being a (1) Bachelor 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) Crichton Royal Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Kinnon of 32 Glasgow St Maxwelltown — pauper and that the said John Kinnon is a (5) person of unsound 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.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is nervous & excitable. He suffers from a delusion that he is haunted night & day by the members of a Secret Society who put bad ideas into his mind & make him do what he knows to be wrong. Two of them have been dogging him lately, but seem when not present they act upon him at a distance by mesmerism or hypnotism

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By Francis Dodds Inspector of Poor Parish of Morton That he had been wandering about the parish in an aimless way & breaking windows without obvious m

Name and Medical Designation, Thomas Ferguson MB CM

Place of Abode, 16 Castle St Dumfries

DATED this Twenty Sixth day of September One thousand nine hundred and five Years

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Joseph Hunter being a (1) Bachelor of Medicine and Surgery University 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 County Buildings Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Kinnon Pauper and that the said John Kinnon is a (5) person of unsound 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.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is depressed and unhappy in appearance. He states that he is under the influence of the members of a Secret Society who follow him day and night - incite him to commit misdemeanours - advise him to commit suicide and annoy by sounds and remarks as he walks along the street

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I am informed by Police Officers that he has on two different occasions broken windows in the complex without any reasonable cause

Name and Medical Designation, Joseph Hunter MB CM (Edin) Medical Officer

Place of Abode, 31 Castle Street Dumfries

DATED this twenty fifth day of September One thousand nine hundred and five Years

Sheriff Court - Dumfries.

Certified Copy Deliverance pronounced by the Sheriff-Substitute of Dumfries and Galloway, at Dumfries upon the Petition of Charles Stewart Dyer, Procurator-Fiscal of Court, at Dumfries, for the Public Interest, for Committal of John Kinnon, a Labourer, presently in custody at the County Buildings, Dumfries, as a dangerous Lunatic under Sec: 157 The Lunacy (Scotland) Act 1862.-

Dumfries, 25th September 1903.- The Sheriff-Substitute having considered the foregoing Petition, with the Medical Certificate produced, grants warrant to commit John Kinnon named in the Petition to the Crichton Royal Institution for Lunatics, at Dumfries, as a place of safe custody, ad interim, + + + +.-

(signed) Geo: Sampson.

A true Copy
Certified by me,
Jno. H. McBurnie.
Sh. Clerk, Dfs. & Kirkcudbright.

Dumfries,
25th September 1903.

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) Banker of Residence of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal in the County of Dumfries, seen and personally examined John Kimm, 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.

Thomas Ferguson MB.

DATED this twenty sixth day of September One thousand nine hundred and five 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 Kimm to whom the foregoing Certificate of Emergency refers.

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

Signature and Address Francis Dodds, Morton, Thornhill

Date 26th Sept 1905

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

I, John Kerr, Esquire, Honorary, (1) Sheriff Substitute of the (2) Stewartry of Kirkcudbright at Dumfries having had produced to me, with a Petition at the instance of (3) Francis Dodds. Inspector of Poor. Morton Certificates under the hands of Thomas Ferguson and Joseph Hunter 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 Kimm, 32 Glasgow Street Maxwelltown (Carpenter) and that the said John Kimm is a (5) 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.
(4) Describe him, 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 John Kimm as a Patient into the (6) 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 Kimm which accompanied the said Petition.

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

DATED [at Dumfries] this twenty ninth day of September One thousand nine hundred and five years.

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

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

[Signature] Jas Kerr Clerk

No. 9468.

John Kincaid.

(Dublin)

Adm: 25 September 1905.

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 Susan Flannigan 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 Susan Flannigan 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 Twenty fifth (*) day of September One thousand nine hundred and five 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 Flannigan
2. Sex and age,	Female – 38
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,	120 St michael St Dumfries
7. Place where found and examined,	120 St michael st Dumfries
8. Length of time Insane,	a few days.
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	38
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,	25th Sept 1905.
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,	Yes mother Margt Johnstone Flannigan at present in C.R. Asylum.
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 fifth day of September One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

No. 9469

Name, Susan Flannigan
(Dumfries)

Date of Admission, 25 Sept: 1905.

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) Dumfries and Galloway, and his Substitutes,—

The Petition of James Haynes Austin Inspector of Poor of the Parish of Urr, and residing at Dalbeattie;

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary McKeyne, 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 McKeyne, 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*) J. M. Austin.

(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 September, 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 McKeyne.
2. Sex and Age,	Female. 17 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Servant.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Barrhill, Dalbeattie.
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	2 or 3 years.
9. Whether First Attack,	✓
10. Age (if known) on First Attack,	✓
11. When and where previously under Examination and Treatment (5)	Has not been previously under Treatment.
12. Duration of Existing Attack,	about a week.
13. Supposed Cause,	dont know.
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,	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,	Father—Joseph McKeyne Labourer Barrhill, Dalbeattie. no. So far as known.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

(5) If patient has previously in an Asylum, state actual 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 fifth day of September, One thousand nine hundred and five.

(*To be signed by the party applying*) J. M. Austin.

T. & A. C.—May 1905.

P p.

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Name Susan Flannigan
No. 1965

MEDICAL CERTIFICATE. No. I.

I, the undersigned, Robt. McKerchar, M.B. & Ch. —
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) Barhill
Dalbeattie, — — — in the County of
Kirkcudbright — separately from any other Medical Practitioner,
visited and personally examined (4) Mary McCheyne — —
— — and that
the said Mary McCheyne, — — is a (5) person of
unsound 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 childish in her manner and in her answers to questions — She told me she runs away from home because her Father abuses one of her Sisters. I know this to be untrue —

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The Mother tells me that she has repeatedly wandered from home and left. Sometimes without reasonable cause. That she has been at times violent & always untruthful. She considers her unbalanced and

Name and Medical Designation, } R. McKerchar M.B. Ch.

Place of Abode, Dalbeattie

DATED this twenty fifth day of September, One thousand nine hundred and five.

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

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

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

(4) *Insert 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 Andrew David Gillespie, —
being a (1) Bachelor of Medicine & Master in Surgery, formerly 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) Barhill,
Dalbeattie, — in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Mary Mc. Cheyne, —
— and that
the said Mary Mc. Cheyne, — is a (5) person of
unsound 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 would not answer questions at all. When I saw her she seemed quite melancholy & sat all the time I was in turning about her fingers.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Both her mother & father say she wanders off by herself and won't tell them where she has been & otherwise is in a peculiar manner. Has been mentally affected for some years and has according to this statement threatened to take her own life. Is violent at times.

Name and Medical Designation, } J. A. D. Gillespie M.B. Ch. Ed.

Place of Abode, Dalbeattie

DATED this twenty fourth day of September, One thousand nine hundred and five.

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

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

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

(4) *Insert 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, Samuel and David Gillespie, being (1) MB Edin CM, hereby certify, on soul and conscience, that I have this day, at (2) Barbill, in the County of Kirkcudbright, seen and personally examined Mary McCheyne, 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.

D. & S. Gillespie

DATED this twenty fourth day of September, 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 Asylum, Dumfries, Asylum to receive therein Mary McCheyne, 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 25 September 1905.

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

I, George Campion Esquire, Advocate, Sheriff Substitute of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of James Menzies Austin, Inspector of Poor, Ure, Dalbeattie, Certificates under the hands of Robert McKerchar, and Samuel Archibald 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 (4) Mary McCheyne, Barbill, Dalbeattie, (Pauper) and that the said Mary McCheyne, 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 McCheyne, 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 Mary McCheyne, 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.

(7) His, or her.

DATED [at Dumfries,] this Twenty seventh day of September, One thousand nine hundred and five years.

To the Superintendent of the (6) Public *Asylum of* Southern Counties, Dumfries.

(Signature) Geo. Campion

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

No. 9470.

Mary McCheyne.

(Mrs)

Adm: 26 September 1905.

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 Charles Breckenridge Inspector of Poor of the Parish of Penninghame

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Nicholas Hannah or Lanham with whom your Petitioner ~~is~~ has been called upon to deal under Section 15 of Act 25 & 26 Vict Chap 54 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 Nicholas Hannah or Lanham to the Royal Asylum at Dumfries and to sanction her admission into the said Asylum.

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

Charles Breckenridge

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

DATED this 26th (4) day of Sept One thousand ~~eight~~ hundred and nine five 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,	Nicholas Hannah or Lanham
2. Sex and Age,	Female; 63 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Has been married for 38 years; was previously a Housemaid.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	45 Princes Street, Newton Stewart
7. Place where Found and Examined,	The prison, Wigtown
8. Length of time Insane,	Has been in indifferent health for some time
9. Whether First Attack,	No. Second attack
10. Age (if known) on First Attack,	About 49 years
11. When and where previously under Examination and Treatment,	In Southern Counties Asylum about 14 years ago.
12. Duration of Existing Attack,	Has been insane for some months.
13. Supposed Cause,	?
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Might be
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Penninghame
18. Date of becoming Chargeable,	26 September, 1905
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,	Thomas Lanham Husband, a Cabman Lives Private 45 Princes St. Newton Stewart No member 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 26th day of Sept One thousand Nine ~~eight~~ hundred and five

(*To be signed by Party applying*) Charles Breckenridge 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 Arnold Hunter
being a (1) Bachelor of Medicine & Master of Surgery of the Uni
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Prison
Wigtown
in the County of
Wigtownshire separately from any other Medical Practitioner,
visited and personally examined (4) Nicholas Hannah or Lauchan
wife of Thomas Lauchan, 45 Prince St Kirkcudbright, pauper and that
the said Nicholas Hannah or Lauchan is a (5) an 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) Talks very incoher
& incorrectly. Has delusions regarding Hypodermic
Medicine & Poisons regarding neighbours having put
them there. Says they are in holes

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Sergeant Young states that she charged attempted
by saying a person of the street. Has been in
Asylum before.

Name and Medical Designation, John A Hunter M.B. C.M.

Place of Abode, Deerwood, Wigtown

DATED this 26th day of September One thousand eight
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.

(6) *State the facts.*

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

I, the undersigned, John Henry Imrie Arnold
being a (1) Member of the Royal College of Surgeons of
England & Licentiate of Royal College of Physicians
and being in actual practice as a (2) Surgeon & Physician
hereby certify, on soul and conscience, that I have this day, at (3) Wigtown
Wigtown Asylum separately from any other Medical Practitioner,
visited and personally examined (4) Nicholas Hannah or Lauchan
wife of Thomas Lauchan, 45 Princes street, Newton Stewart and the
the said Nicholas Hannah or Lauchan is a (5) an insane Pauper
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)
Incoherent in conversation & states she is visited
by our Lord Jesus Christ — & believes that there
are sending electric currents through & the

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Police inform me that she is of opinion
that people are using electric influence
on her

Name and Medical Designation, John Henry Imrie Arnold
M.B.C.S. L.R.C.P. Lond

Place of Abode Wigtown

DATED this 26th day of Sept One thousand eight
hundred and five

One thousand

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, Ebenezer Shaw Sheriff ~~Substitute~~
of the (3) ~~Sheriffdom~~ of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (4) Charles Breckenridge Inspector of Poor of the Parish of Terregleane
Certificates under the hands of John Arnold Hunter, M.B. C.M. Wigtown
and ~~John Kenty Murray~~ Agnew L.R.C.S. L.R.C.P. London, 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)
Nicholas Hannah or Lanham and that the said
Nicholas Hannah or Lanham is an (5) insane person

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Nicholas ~~Hannah or Lanham~~ as a Patient into the (6) 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 Nicholas Hannah or Lanham which accompanied the said Petition.

DATED this twenty seventh day of September One thousand ~~eight~~ nine hundred and five years

Eben Shaw

To the Superintendent of the (7) Royal 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. 96 41.

Nicholas Hannah or
Lanham.
(Pennington)
Adm: 27 September 1905.

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) Lothians and Peebles *and his Substitutes,—*

The Petition of Mrs Elizabeth Young Somerville or McCracken, wife of Joseph McCracken, 16 Granville Terrace, Edinburgh humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that the said Joseph McCracken, 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 Joseph McCracken to the Craiglockhart Royal Institution, Edinburgh 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 & M.E. McCracken

(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 September One thousand nine hundred and five

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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,	Joseph McCracken
2. Sex and Age,	Male 52
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Clergyman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	16 Granville Terrace
7. Place where Found and Examined,	Do.
8. Length of time Insane,	For About 2 years past
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	Not Known
11. When and where previously under Examination and Treatment (5)	In Craiglockhart for about 18 months; left there about 18 months ago
12. Duration of Existing Attack,	
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,	Eldest brother – Samuel McCracken 110 Hatfield Road, Birmingham No insanity among 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 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 twenty seventh day of September One thousand nine hundred and five

(To be signed by the party applying) E & M.E. McCracken

P. p.

T. & A. C.—May 1905.

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 George Dawson being a (1) Bachelor of Medicine and Master of Surgery 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 16 Granville Terrace Edinburgh in the County of Mid Lothian separately from any other Medical Practitioner visited and personally examined (4) Joseph McCracken, of no occupation residing at 16 Granville Terrace Edinburgh and that the said Joseph McCracken is a (5) person of unsound 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)

Refuses food because it was destroying him as he had no digestion and had not any motion of bowels. Excessively depressed, sleepless, and restless. Says he is to be 'buried alive'.

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

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

He was detained in Morningside for 15 months as a melancholic.

Name and Medical Designation, D. G. Dawson M.B. C.M.

Place of Abode. 9 Granville Terrace

DATED this 26th day of September. 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, James Butler being a (1) Bachelor of Medicine & Master in Surgery Glasgow University (1876) and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) No. 16 Granville Terrace Edinburgh in the County of Mid Lothian separately from any other Medical Practitioner, visited and personally examined (4) Joseph McCracken of no occupation residing at 16 Granville Terrace Edinburgh and that the said Joseph McCracken is a (5) person of unsound 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 very much depressed in mind, knows that his soul is lost for ever owing to his sins & that for all time to come he will be lost both in this world & the future. He has delusions about his food. He is very destructive in his habits, will not come out of his room & continually shouts out 'Oh Sedrane'.

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

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

He has been under treatment before for over a year at Morningbank for melancholia & has a peculiar desire to interfere with the gas pipes in the House.

Name and Medical Designation, Jno Butler M.B. C.M.

Place of Abode, 14 Charlotte St. Leith

DATED this 25th day of September One thousand nine 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,
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 Crawford Gray (1) Sheriff Substitute
of the (2) Sheriffdom of the Lothians and Peebles
having had produced to me, with a Petition at the instance of (3) Mrs Elizabeth Young or M'Cracken 16 Granville Terrace Edinburgh wife of and
Certificates under the hands of David George Davidson & W.S.
and James Butler & W.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) Joseph M'Cracken 16 Granville Terrace Edinburgh husband and that the said Joseph M'Cracken 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 Joseph M'Cracken as a patient into the Royal Middleton Dumfries Asylum ~~of~~ and I authorize (6) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph M'Cracken which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Burgh.
(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) His, or her.

DATED [at Edinburgh] this Twenty Seventh day of September One thousand nine hundred and five

To the Superintendent of the (8) Asylum ~~Asylum of~~ Royal Middleton Dumfries

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

[*Signature*] John C. Gray

No. 9492.

Joseph McCracken.

Adm: 28 September 1905.

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 Miles Mc Innes Inspector of Poor Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Millican — 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 James Millican 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) Miles Mc Innes

(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 October One thousand nine hundred and five 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 Millican.
2. Sex and Age,	Male.
3. Married, Single, or Widowed,	—
4. Condition of Life, and previous Occupation (if any),	Mason.
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Crichton Royal Institution
7. Place where Found and Examined,	Do.
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 (5)	Crichton Royal Institution Since 19 Sept. 1905.
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,	Dumfries 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,	
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 on or approximate thereto. If previously under ation or treatment state fact.

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

DATED this thirtieth day of September One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

P. p.

T. & A. C.—May 1905.

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 Rutherford
being a (1) Fellow of the Royal Colly 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) Crichton Royal Institution, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Millican, a pauper, from the Poor, Maxwelltown and that the said James Millican is a (5) person of unsound 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 stupid confused and incoherent. Can give no account of his place of residence or Antecedents.

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

Name and Medical Designation, James Rutherford M.D.

Place of Abode. Crichton House, Dumfries

DATED this thirtieth day of September 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.

(6) *State the facts.*

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

I, the undersigned, Peter Murray Kerr
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) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Millican, a pauper from the Poor House, Maxwelltown and that the said James Millican is a (5) person of unsound 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 stupid and facile Shows great confusion by forgetting days of week. He is rambling in his speech & incoherent

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 third day of October One thousand nine 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, 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 Millican, a 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.

James Rutherford M.D. &c

DATED this thirtieth day of September 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 Asylum to receive therein James Millican 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

Date 30th Sept. 1905.

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

I, George Campion, Advocate, Sheriff-Substitute of (1) Dumfries and Galloway, at Dumfries having had produced to me, with a Petition at the instance of (2) Miles McInnes, Inspector of Poor, Dumfries, Certificates under the hands of James Rutherford 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) James Millican, Crichton Royal Institution, Dumfries, (Pauper) and that the said James Millican 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 Millican 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 Millican 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.
(7) His, or her.

DATED [at Dumfries] this Third day of October, One thousand nine hundred and five years.

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

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

[Signature] Geo Campion

No. 9 of 93.

James Killican

(Drifter)

Adm. 30 September 1905.

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 W. D. Hazelton Deramore Drive, Belfast,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Johnetta Phoebe Hazelton, 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 Johnetta Phoebe Hazelton, to the Royal Victoria 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. D. Hazelton.

(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 five 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,	Johnetta Phoebe Hazelton.
2. Sex and Age,	female. 44.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	none.
5. Religious Persuasion, so far as known,	Methodist.
6. Previous Place of Abode,	31 Clifton Villa Belfast.
7. Place where Found and Examined,	
8. Length of time Insane,	two to three years at first attack.
9. Whether First Attack,	second attack.
10. Age (if known) on First Attack,	about 31.
11. When and where previously under Examination and Treatment (5)	Garlmoral, Glasgow.
12. Duration of Existing Attack,	about one year
13. Supposed Cause,	not known.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no. except on the occasion on which she threatened her sister.
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,	W. D. Hazelton brother Deramore Drive, Belfast. 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 and date of latest notice or appearance 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 Third — day of October, — One thousand nine hundred and five years.

(To be signed by the party applying) W. D. Hazelton.

T. & A. C.—May 1905.

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 Smyth Morrow of Medicine of the Royal University of Belfast being a (1) Doctor and being in actual practice as a (2) physician do hereby certify, on soul and conscience, that I have this day, at (3) 31 Cliftonville Road, Belfast, in the County of Antrim, separately from any other Medical Practitioner, visited and personally examined (4) Johnetta Phoebe Hazelton, Spinster, of 31 Cliftonville Road, Belfast, and that the said Johnetta Phoebe Hazelton is a (5) person of unsound 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 sitting on her nightdress, at 1 o'C on the afternoon, and on my asking her why she would not put on her ordinary apparel she said she could not. I have found her frequently under similar circumstances. On the 29th ult I saw her seated in the middle of the garden where she remained for an hour, although the passers-by were observing her (she was not engaged in gardening at the time); she is quite careless in her apparel and personal appearance, being formerly quite particular in this respect.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She sits and writes meaningless sentences on paper for hours at a time: she is prone from one room to another quite naked: she occasionally destroys small articles of drawing room furniture on being expostulated with she has threatened to kill her sister Annie Hazelton. from whom this information is derived.

Name and Medical Designation, J. S. Morrow M.D.

Place of Abode. 2a Howard Belfast

DATED this second 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, Frederick Hugh Clarke, being a (1) Bachelor of Medicine & Master in Surgery of Glasgow University and in actual practice as a (2) Physician & Surgeon, do hereby certify, on soul and conscience, that I have this day, at (3) The Ulster Royal Institution, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Johnetta Phoebe Hazelton Spinster. 31 Cliftonville Road. Belfast, and that the said Johnetta Phoebe Hazelton, is a (5) person of unsound 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 morbid, despondent, indifferent to her surroundings and condition. Her general condition is that of weak-mindedness.

(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, Fred: Hugh Clarke M.B.

Place of Abode, Charlotte Street Dumfries

DATED this fourth day of October, — One thousand nine 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 Smyth Morrow, being (1) a Doctor of Medicine of the Royal University of Ireland hereby certify, on soul and conscience, that I have this day, at (2) 31 Clifton St Belfast in the County of Antrim, seen and personally examined Johnetta Phoebe Hazelton, 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.

J. S. Morrow M.D

DATED this Second day of October 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 Johnetta Phoebe Hazelton to whom the foregoing Certificate of Emergency refers.

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

Signature and Address W. D. Hazelton, Dfs

Date 3rd October, 1905.

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

I, George Lampson, Advocate, Sheriff Substitute (1) of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (2) W. D. Hazelton, Deramore Drive, Belfast, Certificates under the hands of John Smyth Morrow, and Frederick Hyde 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 Johnetta Phoebe Hazelton 31 Cliftonville Road Belfast (Patient's Sister) and that the said Johnetta Phoebe Hazelton, 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 Johnetta Phoebe Hazelton, as a patient into the (4) 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 Johnetta Phoebe Hazelton 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.
(4) His, or her.

DATED [at Dumfries,] this Fifth day of October, One thousand nine hundred and five years. ~~one~~ word deleted. -

To the Superintendent of the (4) Public Asylum of Crichton Royal Institution, Dumfries.

[Signature] Geo. Lampson

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

No. 9474.

Johnetta Phoebe Hazelton.

Adm: 4 October 1905.

Enc

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 & Galloway, *and his Substitutes,*— at Dumfries.

The Petition of John Rogers, 14 Bank Parade. Preston

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates that Helen Rogers,

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

your Petitioner's (1) 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 authorise the transmission of the said Helen Rogers, to the Crichton Royal Institution at Dumfries, and and to Sanction her admission into the said Institution.

(To be signed by the Party applying) John Rogers

(2) The date of the Petition is to be within fourteen clear days following the dates of the Medical Certificate.

DATED this fifth (2) 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.

Christian Name and Surname of Patient at length,	Helen Rogers.
Sex and Age,	Female. 39 years.
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any).	Clergyman's daughter.
Religious persuasion, so far as known,	Church of England.
Previous Place of Abode,	Accrington.
Place where Found and Examined,	14 Bank Parade, Preston, Lancashire.
Length of Time Insane,	Two to three months gradual.
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,	Two to three months.
Supposed Cause,	Time of life.
Whether subject to Epilepsy,	No.
Whether Suicidal,	Yes.
Whether dangerous to others,	No.
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,	John Rogers, 14 Bank Parade, Preston, Lancs. — Father. — A brother nervous sufferer.
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 fifth day of October, One thousand nine hundred and five.

(To be signed by party applying) John Rogers

MEDICAL CERTIFICATE No. I.

I, the undersigned Robert Charles Brown, ——— being a (1) Member of the Royal College of Physicians of Lond and being in actual practice as a (2) Physician, ——— do hereby certify, on soul and conscience, that I have this day, at (3) 14 Bank Parade Preston, ——— in the County of Lancaster — separately from any other Medical Practitioner, visited and personally examined (4) Helen Rogers, ——— ——— and that the said Helen Rogers, ——— is a (5) person of unsound 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.

(6) *State the facts.*

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

(1) refuses to take food.
(2) will not reply to questions.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her father the Revd Jno. Rogers states that she has threatened to commit suicide

Name and Medical Designation, Robert Charles Brown Physi
Place of abode, 27 Winckley Square Prest

DATED this fifth — day of October, One thousand eight hundred and seventy five.

MEDICAL CERTIFICATE No. II.

I, the undersigned Peter Murray Kerr, ——— being a (1) Bachelor of Medicine & Master in Surgery of the University of Edinburgh, and being in actual practice as a (2) Resident Practitioner, 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) Helen Rogers, a Spinster, 14 Bank Parade, Preston, Lancashire ——— and that the said Helen Rogers, ——— is a (5) person of unsound 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.

(6) *State the facts*

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

She is very miserable & depressed
Hands absolutely still. Refuses to answer any reasonable question.

(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.C.M.
Place of abode, 27 Castle Street Dumfries

DATED this Fifth — day of October — One thousand nine 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 Robert Charles Brown
being (1) a member of the Royal College of Physicians, London (1) State medical qualification. (2) State place of examination.
hereby certify, on soul and conscience, that I have this day, at (2) 14 Bank Parade Preston
in the County of Lancaster, seen and personally examined Helen Rogers, 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.

Robert Charles Brown

DATED, this fifth day of October, One thousand ~~eight~~ 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 at Dumfries, to receive therein Helen Rogers to whom the foregoing certificate of emergency refers.

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

Signature and Address, John Rogers 14 Bank Parade, Preston.

Date, October 5th 1905.

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 (1) Insert Name & Designation
having had produced to me, with a Petition at the instance of (1) John Rogers, 14 Bank Parade, Preston, Certificates under the hands of Robert Charles Brown, 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) Helen Rogers, 14 Bank Parade, Preston, (Peter's daughter), and that the said Helen Rogers, 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 Helen Rogers, 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 Helen Rogers, 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 Seventh day of October, One thousand ~~eight~~ nine hundred and five Years Five words ~~deleted~~ five letters deleted.

Jno Clerk

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9495.

Name, Helen Rogers.

Date of Admission, 5th October 1905.

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 Morrison, Inspector of Poor, Dryfesdale:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John Carson,

(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 John Carson, to the Dumfries Royal Asylum, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) James Morrison

(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 nine hundred and five 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 Carson.
2. Sex and Age,	Male. 46 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	formerly a Cattle Dealer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	33 Bridge St Lockerbie
7. Place where Found and Examined,	Lockerbie.
8. Length of time Insane,	Several Months
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	41 Years.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution.
12. Duration of Existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	Yes.
15. Whether Suicidal,	
15. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dryfesdale.
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 Carson—Mother— 33 Bridge St. Lockerbie.
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 6th day of October, — One thousand nine hundred and five years.

(*To be signed by the party applying*) James Morrison

T. & A. C.—Sept. 1903.

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 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) 32, Bridge Street, Lockerbie
Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Carson, 32, Bridge Street Lockerbie, Pauper and that the said John Carson is a (5) Person of unsound 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 fearfully excited, hawking at the top of his voice, attempted to stick me with a knife. Says that God has given him a log comes to take down the Country. Has seen a Corpse today (Johnnie). Has been in Kirkpatrick General Lunatic Asylum.

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

Name and Medical Designation, J. Bell. M.B. C.M.
Place of Abode, Lockerbie
DATED this Sixth 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.

(6) *State the facts.*

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

I, the undersigned, Sidney John Cullum
being a (1) Doctor of Medicine & Bachelor of Surgery of the University of Dublin
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) John Carson 32 Bridge Street Lockerbie Pauper and that the said John Carson is a (5) person of unsound 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 Conversation rambling & incoherent. He is excited, impulsive & threatening. His memory is much impaired. He suffers from Epilepsy.

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

Name and Medical Designation, Sidney John Cullum M.B.
Place of Abode, Crichton Royal Institution Dumfries
DATED this 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 any Order by the Sheriff.)

I, the undersigned, J. C. Bell being (1) an M. B., & C. M. of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) 32, Bridge St. Lockerbie in the County of Dumfries, ——, seen and personally examined John Carson, 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.

J. C. Bell

DATED this Sixth day of October — 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 John Carson 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, Lockerbie

Date 6th October 1905.

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) James Morrison, Inspector of Poor, Bryfesdale, Certificates under the hands of J. C. Bell and Sidney John Cullum, 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 Carson, 32 Bridge Street, Lockerbie, (a pauper), and that the said John Carson, —— 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 John Carson 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 John Carson, 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 Ninth day of October, One thousand nine hundred and five Years. Two words deleted

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

[*Signature*] John Clerk

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

No. 9476.

John Carson.

(Dryfesdale)

Adm: 6 October 1905.

14.996.

[FORM B[2]]

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 J. Shaw Maclaren being desirous to transfer Mrs Daisy Steuart Ogilvy Shaw Maclaren at present a Patient in Balgreen Gorgie, and (1) whose nearest known relation I am from the said Asylum to the Crichton 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, ... Daisy Steuart Ogilvy Shaw Maclaren
2. Sex and Age, ... female 34
3. Married, Single, or Widowed, . . married
4. Condition of Life, and Previous Occupation (if any), ... — —
5. Religious Persuasion, so far as known, . Episcopal church
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 Shaw Maclaren Dundiff Skalmoski husband No

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*) J. Shaw Maclaren

(2) husband

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 9th day of October One thousand eight hundred and five

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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 1876.

No. 14996.

MEDICAL CERTIFICATE.

I, the undersigned Blue Matty Duke

(1) Name Asylum. hereby certify that I have this day at (1) Bal gren. Gogie. Edinburgh personally examined Daisy Stewart Ogilvy Shaw Maclaren who has been a

(2) Insert Date of Admission. Patient in said Asylum since (2) February 1st 1905 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 ~~epileptic,~~ (4) ~~suicidal~~, (5) dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State. the Patient, that (4) she is liable to attacks of mania

(5) Describe Bodily State. and with respect to the Bodily State of the Patient, that (5) it is fair

and that there is nothing in the Mental or Bodily State of the Patient to make removal to the (1) Royal Crichton Asylum 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:—

She is very impulsive and attacks her nurses without any apparent reason

(Name) Blue Matty Duke

(Medical Qualification) M.D. F.R.C.P

(Date) 7th October 1905

No. 9477
Daisy Stewart Ogilvy Shaw Maclaren
Adm: 1st October 1905.

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 Daisy Stewart Ogilvy Shaw Maclaren from Saughton Hall 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. D. Bruce Secretary ~~Commissioner~~.

DATED at Edinburgh, this 10th day of October. One thousand ~~eight~~ nine hundred and five

Date of Sheriff's Order [*to be inserted at the Office of Board*].

2nd February 1905

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~~ and Galloway and his Substitutes,—at Dumfries.

The Petition of James Morrison, Inspector of Poor Langholm

humbly sheweth that it appears from the subjoined Statement, and accompanying Medical Certificates, that Hannah Sarah Banks 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 Hannah Sarah Banks 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*) Jas Morrison Inspector of Poor Langholm

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 12 (4) day of October One thousand nine hundred and five

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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,	Hannah Sarah Banks
2. Sex and Age,	Female. 22 years (30 June 1883)
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,	2 Henry St Langholm
7. Place where Found and Examined,	Langholm
8. Length of time Insane,	2 days
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,	2 days
13. Supposed Cause,	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,	Langholm
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 Banks Shoemaker 2 Henry St Langholm her Grandfather. Her mother was for a short time in the Gartlands
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 12th day of October One thousand nine hundred and five

(*To be signed by the party applying*) Jas Morrison

P. p.

T. & A. C.—May 1903.

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 Gill
being a (1) Bachelor of Medicine &c of Univ. 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) 2 Henry St. Langholm Dumfries in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Hannah Sarah Banks, 2 Henry St. Langholm and that the said Hannah Sarah Banks is a (5) person of unsound 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 visiting her I found her excited & restless & constantly talking incoherently, and protesting that she had not poisoned her mother.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her grandfather William Banks 2 Henry St. Langholm told me that she had become very excited shortly before my visit & had gone down a street shouting wildly that she had not poisoned her mother.

Name and Medical Designation, John Gill M.B., &c

Place of Abode Langholm

DATED this eleventh 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, Frank Hendry Rae
being a (1) L.R.C.P. &c
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 Henry St Langholm Dumfries in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Hannah Sarah Banks 2 Henry St Langholm and that the said Hannah Sarah Banks is a (5) person of unsound 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 she could not help poisoning her aunt and acting in a bewildered incoherent manner

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

That she opened the window this morning and went on to the street undressed

Name and Medical Designation, F Hendry Rae L.R.C.P.

Place of Abode Langholm

DATED this 12th day of Oct. One thousand nine hundred and 07

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 Gill
being (1) Bachelor of Medicine of Edin. Univ^y
hereby certify, on soul and conscience, that I have this day, at (2) 2 Henry St Langholm
in the County of Dumfries, seen and personally examined
Hannah Sarah Banks, 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 Gill M.B., F.R.C.

DATED this eleventh day of October 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 Asylum to receive therein Hannah Sarah Banks to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Inspector of Poor

Signature and Address A.S. Morrison Inspector of Poor Langholm

Date 12th October 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampion, Esquire, Advocate, Sheriff-Substitute (1) of the (2) Dumfries & Galloway at Dumfries having had produced to me, with a Petition at the instance of (3) James Morrison, Inspector of Poor, Langholm Certificates under the hands of John Gill and Frank Hardy Rae 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) Hannah Sarah Banks, 2 Henry Street, Langholm (a pauper) and that the said Hannah Sarah Banks 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 Hannah Sarah Banks as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Hannah Sarah Banks 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.
(7) His, or her.

DATED [at Dumfries] this Thirteenth day of October One thousand nine hundred and five years. Two words deleted

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution at Dumfries.

(8) Public, District, Parochial, or Private.

[*Signature*] Geo. Lampion

No 9498.

Hannah Sarah Banks
(Langholm)

Adm: 12 October 1905.

[Form A]

N.B.—*This form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

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 showeth that it appears from the subjoined Statement and accompanying Medical Certificates that Robert McHolm, 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 authorise the transmission of the said Robert McHolm, 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 Twelfth — (*) day of October, — One thousand nine hundred and five 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 McHolm.
2. Sex and age,	male. 51.
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,	moorheads Hospital, Dumfries.
7. Place where found and examined,	Do Do
8. Length of time Insane,	a few days.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	51
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Nowhere.
12. Duration of Existing Attack,	not known.
13. Supposed Cause,	not known
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,	Dumfries.
18. Date of becoming Chargeable,	11th Octr. 1905.
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 Eleventh — day of October, — One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

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, 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) Moorhead's Hospital, Dumfries, — in the County of Dumfries — separately from any other Medical practitioner, visited and personally examined (4) Robert McHolm, a pauper Moorhead's Hospital, ——— and that the said Robert McHolm — is a (5) person of unsound 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 very nervous and irritable complains of being annoyed with people of whom he knows. He has delusions & hears unseen agency. Voices speak to him & around. Without provocation

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7).

mind madden the Matron informs me that he refuses & takes his food and that he sleeps little.

Name of Medical Designation, } Peter Murray Kerr MB Ch.B

Place of Abode, 20 Castle Street Dumfries

DATED this twelfth 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, Joseph Hunter, ——— being a (1) Bachelor of Medicine and Surgery 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) Moorhead Hospital Dumfries, ——— in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Robert Mc Holm, Pauper, the said Robert McHolm — is a (5) person of unsound 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 suggests a mental derangement. He is nervous in manner — makes a great many incoherent statements — says that he is followed by voices which speak into his ear, constantly threatening annoyance and have sometimes, advised him to commit

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

The Matron at Moorhead Hospital has frequently informed me that he gives a great deal of trouble at night — will not mix with other persons if he can help it and will not take food unless forced to it.

Name of Medical Designation. } Joseph Hunter

Place of Abode, 31 Castle St Dumfries

DATED this twelfth day of October, — One thousand nine hundred and five.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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) Medical Practitioner ———
hereby certify, on Soul and Conscience, that I have this day, at (2) Moorheads, ———
in the County of Dumfries ———, seen and personally examined
Robert McHolm ———, 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.

(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 Twelfth day of October ——— One thousand nine hundred and four years.

Peter Murray Kerr

(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 Robert McHolm ——— 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 McJames 28 Queen St Dfs.

Date, 12th Octr: 1905.

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 McJames, Inspector of Poor, Dumfries, ——— Certificates under the hands of Peter Murray Kerr, ——— and Joseph Hunter, ——— being two Medical Persons duly qualified in terms of an Act, entituled "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) Robert McHolm, Moorheads Hospital, Dumfries, Pauper, and that the said Robert McHolm, 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 Robert McHolm, ——— 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 Robert McHolm, ——— which accompanied the said Petition.

(1) Insert Name and Designation.
(2) Describe him, and a Pauper, ———
(3) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.

Dated this Twelfth ——— day of October ——— One thousand nine hundred and five years. Three words deleted.

Geo. Campion

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9479.

Name, Robert De Holm
(Dufs)

Date of Admission, 12th October 1905.

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) Roxburgh Berwick & Selkirk *of* Jedburgh *and his Substitutes,—*

The Petition of John Jardine, Grocer — Hawick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Kidd Jardine 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 James Kidd Jardine to the Crichton Royal Inst. Dumfries 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*) John Jardine

(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 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,	James Kidd Jardine,
2. Sex and Age,	Male. 29 years.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Grocer.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	19 Ettrick Terrace Hawick
7. Place where Found and Examined,	4 Dec 05 Do. Do.
8. Length of time Insane,	One week.
9. Whether first Attack,	Second.
10. Age (if known) on first Attack,	29 years.
11. When and where previously under Examination and Treatment (5)	One week.
12. Duration of existing Attack,	Alcohol.
13. Supposed Cause,	No.
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. 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 Jardine, Servant. Miller Hawick. Father — No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

(5) If patient has recently 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 thirteenth day of October One thousand nine hundred and five.

(*To be signed by the Party applying*) John Jardine

& A. C.—Oct. 1904.

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 Gunn Bannerman being a (1) Surgeon and being in actual practice as a (2) Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) 7 Roseneath Road Harlesden in the County of Middlesex separately from any other Medical Practitioner visited and personally examined (4) James Hislop Jardine and that the said James Hislop Jardine is a (5) person of unsound 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 talks incoherently, is excited. Calls for axe and threatens to do bodily injury.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife tells me that she is afraid to live with him and his father John Jardine states that he cannot be kept in the house but goes out at all hours and is frequently found lying intoxicated.

Name and Medical Designation, G. Gunn Bannerman M.B.

Place of Abode, 24 Bridge St. Harrow

DATED this thirteenth day of October One thousand nine hundred and four.

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 Rundell Barrie being a (1) Bachelor of Medicine & Master in Surgery and being in actual practice as a (2) Physician & Surgeon Devon do hereby certify, on soul and conscience, that I have this day, at (3) ~~Station Rd~~ 18 Lands in the County of Roseneath separately from any other Medical Practitioner visited and personally examined (4) James Hislop Jardine residing Elliots Farm Harrow and that the said James Hislop Jardine is a (5) person of unsound 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 incoherently is very excitable. Quarrelsome & threatens to assault me for no apparent reason.

(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 takes great craving for alcohol when it is impossible to obtain it.

Name and Medical Designation, Wm Rundell Barrie M.B.

Place of Abode, 18 Bridge St Harrow

DATED this thirteenth day of October One thousand nine hundred and four.

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, Wm Turnbull Barrie
being (1) Bachelor Medicine & Master in Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Jedburgh
in the County of Roxburgh, seen and personally examined
James Bishop 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.

(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.

Wm Turnbull Barrie.

DATED this thirtieth day of October 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

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, Robert Bellerby (1) Sheriff Substitute
of the (2) County of Roxburgh
having had produced to me, with a Petition at the instance of (3) John Jardine Grocer Hawick
Certificates under the hands of George Gunn Bannerman M.B. C.M.
and Wm Turnbull Barrie 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) James Bishop Jardine Grocer Hawick and that the said James Bishop Jardine is a (5) 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.
(4) Describe him, 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 James Bishop Jardine as a patient into the (6) Crichton Royal ~~Asylum of~~ Institution Dumfries and I authorize (7) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Bishop Jardine which accompanied the said Petition.

(6) Public, District, Parochial, or Private.
(7) His, or her.

DATED [at Hawick] this thirteenth day of October One thousand nine hundred and five

To the Superintendent of the (8)
Crichton ~~Asylum of~~ Royal Institution
Dumfries.

(8) Public, District, Parochial, or Private.

[Signature] Robert Bellerby

No. 9480.

James Hislop Sardine

Adm: 13 October 1905.

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) County of Dumfries & Galloway and his Substitutes, at Dumfries;

The Petition of Joseph Hinchliffe, Seabrae, Irvine,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Bertha Hinchliffe, 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 Bertha Hinchliffe 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*) Joseph Hinchliffe

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Sixteenth (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,	Bertha Hinchliffe.
2. Sex and Age,	Female, 34.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Teacher of Music.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Irvine.
7. Place where Found and Examined,	Seabrae, Irvine.
8. Length of time Insane,	4 weeks.
9. Whether First Attack,	First attack.
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,	4 weeks.
13. Supposed Cause,	Disappointment.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Yes slightly.
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 Hinchliffe, father. One brother has been for some years in an Asylum.
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 observation or treatment state that fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Sixteenth day of October, One thousand nine hundred and five.

(*To be signed by the party applying*) Joseph Hinchliffe
P. p.

T. & A. C.—May 1905.

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 Thomson
being a (1) doctor of Medicine and Master in Surgery of Glasgow University,
and being in actual practice as a (2) Physician & Surgeon, Seabrae
do hereby certify, on soul and conscience, that I have this day, at (3) Bridgegate, Irvine,
in the County of Ayr,
separately from any other Medical Practitioner, visited and personally examined (4) Bertha Hinchliffe,
and that the said Bertha Hinchliffe, is a (5) person of unsound 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 former mental patient will do nothing but lie in bed & demand sleeping draughts. Her mother who lives and attendance on her, yet she complains of neglect no kindness or attention. Has expressed attack by men frequently talking to himself aloud.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her mother informs me that at times she is quite violent uses bad language, calls her father a dirty old rascal, has struck her mother with a stick & threatened effusion of blood, is dirty in her habits and throws things about the room. Vomiting & sickness after having eaten her food.

Name and Medical Designation, James Thomson M.D.

Place of Abode. Irvine

DATED this 13th 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.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Richardson
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) the Crichton Royal Institution,
in the County of Dumfries,
separately from any other Medical Practitioner, visited and personally examined (4) Bertha Hinchliffe,
Master of Seabrae, Irvine, and that the said Bertha Hinchliffe, is a (5) person of unsound 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 insomnia, Neurasthenia & some Hypochondriasis

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

There is also mental confusion: She was unable to recognise & did not remember she had seen Nurse Isabella Hueston who had bathed her 2 hours previously

Name and Medical Designation, W. Richardson M.D.

Place of Abode, Braddan. Isle of Man

DATED this 15 day of October, One thousand nine 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 James Thomson, being (1) M. D. & C. M. Glasgow University, hereby certify, on soul and conscience, that I have this day, at (2) Seabank, Irvine, in the County of Ayr, seen and personally examined Bertha Hinchliffe, 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 Thomson M. D. & C. M.

DATED this 15th day of October, 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 Dumfries ~~Asylum~~ to receive therein Bertha Hinchliffe to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address Joseph Hinchliffe Seabank

Date 16th October 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk, Honorary Sheriff-Substitute of ~~Dumfries~~ Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) Joseph Hinchliffe, Seabrae, Irvine, Certificates under the hands of James Thomson, and William Richardson, 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) Bertha Hinchliffe, Seabrae Irvine (Petr's daughter) and that the said Bertha Hinchliffe, 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 Bertha Hinchliffe as a patient into the (8) Public Asylum of Crichton Royal Institution, and I authorize (9) Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Bertha Hinchliffe, 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.
(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.
(9) His, or her.

DATED [at Dumfries,] this Sixteenth day of October, One thousand nine hundred and five years.

To the Superintendent of the (8) Public *Asylum* Crichton Royal Institution, Dumfries.

[Signature] John Clerk

(8) Public, District, Parochial, or Private.

No. 9481.

Bertha Hinchliffe.

Admr: 13 October 1905.

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~~ Dumfries & Galloway of _____ *and his Substitutes,*—

The Petition of R. M. M'Clew, Inspector of Poor, Portpatrick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ellen ann M'Clymont 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 Ellen ann M. Clymont 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) R. M. M'Clew

(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 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,	Ellen ann M'Clymont
2. Sex and Age,	Female born 26th June 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,	
7. Place where Found and Examined,	Wigtownshire Combination Poorhouse
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 (5)	
12. Duration of existing Attack,	
13. Supposed Cause,	
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,	Portpatrick 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 Sarah Campbell. Barrack Street Portpatrick (Sister) 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 approximate thereto. If previously under Treatment or treated as Out-Patient state fact.

I certify that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twelfth day of October One thousand nine hundred and five

(To be signed by the Party applying) R. M. M'Clew

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,
being a (1) Bachelor of Medicine & Master in Surgery of the University of St
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 of Stranraer in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Ellen Ann Mc. Colgmont (Pauper) and that
the said Ellen Ann Mc Colgmont is a (5) Person of unsound 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 first (who was under my constant charge for some weeks in Portpatrick)
States that he has never been married before, & that he has never been in Portpatrick.
He also states that he has no name: is a hundred years of age, states that he was born

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

The Governor of the Poorhouse states that he has made attempts to get out
of the window. The Doctor says that the first time at Kirkcudbright, he threatened
his life & attempted to destroy himself.

Name and Medical Designation, John Jas. Robertson M.B., C.M.

Place of Abode, Portpatrick

DATED this fourteenth 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, 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) the Wigtown-
-shire Combination Poorhouse, Stranraer, in the County of
Wigtown separately from any other Medical Practitioner,
visited and personally examined (4) Ellen Ann McColgmont
pauper, and an inmate of the said Poorhouse and that
the said Ellen Ann McColgmont is a (5) person
of unsound 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)

Ellen Ann McColgmont is defective in intelligence
She does not know her name nor her age and cannot add
two and two together. She is at times sulky and at others
excited and noisy and difficult to manage. She inclines to

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Ormiston, matron of the said poorhouse informs me
that Ellen Ann McColgmont is noisy, especially at night, and
wanders about the house and tears her clothing.

Name and Medical Designation, John Alexander Anderson

Place of Abode, Stranraer

DATED this twelfth day of October One thousand
nine 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,
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 Carruthers Esquire Advocate (1) Sheriff Substitute
of the (2) Sheriffdom of Dumfries & Galloway having had produced to me, with a Petition at the instance of (3) R. M. McClure
Inspector of Poor Portpatrick
Certificates under the hands of John James Robertson 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)
Ellen Ann McClymont - pauper and that the said
Ellen Ann McClymont 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 Ellen Ann McClymont as a patient into the (6) Crichton Royal ~~Asylum of~~ Institution Dumfries and I authorize (7) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ellen Ann McClymont which accompanied the said Petition.

DATED [at Stranraer] this twelfth day of October One thousand nine hundred and five years

To the Superintendent of the (8) Crichton Royal ~~Asylum~~ Institution Dumfries

[Signature] John Carruthers

(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) His, or her.
(8) Public, District, Parochial, or Private.

No. 9482.

Ellen Ann McClymont.
(Portpatrick)

Adm: 13 October 1905.

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 James Morrison, Inspector of Poor, Dryfesdale;

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that John McGregor,

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Keeper, 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 McGregor, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) James Morrison

(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 five 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 McGregor.
2. Sex and Age,	Male. 04 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Agricultural Labourer.
5. Religious Persuasion, so far as known,	Wholestaul.
6. Previous Place of Abode,	North Hayrigg. Lochrbie.
7. Place where Found and Examined,	North Hayrigg.
8. Length of time Insane,	Several weeks.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	about the age of 19 years.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution. 1900.
12. Duration of Existing Attack,	Several weeks.
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,	Dryfesdale
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 McGregor North Hayrigg Lochrbie - 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 admission or approximate thereto. If not previously under asylum 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 five.

(*To be signed by the party applying*) James Morrison

T. & A. C.—Sept. 1903. P. p.

No. 0183.

MEDICAL CERTIFICATE, No. I.

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) North
Hayrigg, Moffendale, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) John Mc Gregor, North
Hayrigg, Moffendale, and that
the said John Mc Gregor, Porter, is a (5) person
of unsound 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
unsettled, talks incoherently, is delusional
thinking that his father House belongs to him
& that he has a right to turn every one out of it
he is excitable & always wishes to fight.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His father Mr. Wm Mc Gregor informed
that he, John, says that the place belongs to
him & wishes to turn all the others out &
his mother cant stay. The same tone with

Name and Medical Designation, George Irving M.D.

Place of Abode, Lockerbie

DATED this thirteenth day of October, One thousand
nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert 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, Reginald G. Gordon,
being a (1) M.B. Ch.B. Edin.,
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) John Mc Gregor, of North
Hayrigg, Lochenbrie, and that
the said John Mc Gregor, is a (5) person of
unsound 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 is in
state of excitation, makes some ordinary remark and then
gives fits of laughter: says he is very pleased to come
to the Asylum and would rather be here than
out of it. At times he is not very connected in
conversation.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, R. G. Gordon M.B.

Place of Abode, Crichton Royal Institution

DATED this 14th day of October One thousand
nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert 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, George Irving, being (1) Doctor of Medicine & Master in Surgery, hereby certify, on soul and conscience, that I have this day, at (2) North Bridge Street in the County of Dumfries, ——, seen and personally examined John McGregor 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) Residence of examination.
(3) State place at which Asylum is situated.

George Irving M.D.

Dated this thirteenth day of October, 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 John McGregor, ——
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 Lockerbie

Date 14th October 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I George Sampson, Advocate, Sheriff Substitute (1) of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of James Morrison, Inspector of Poor, Dryfesdale, —— Certificates under the hands of George Irving, —— and Reginald G. Gordon, —— 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 McGregor Northbridgestreet Lockerbie, (Pauper) and that the said John McGregor, —— 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 McGregor 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 John McGregor —— 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 Seventeenth day of October, — One thousand nine hundred and five years.

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution, Dumfries.

[Signature] Geo. Sampson

(7) Public, District, Parochial, or Private.

No. 9483.

John McGregor.

(Dryfesdale)

Adm: 14 October 1905.

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 John Rogers, 14 Bank Parade, Preston.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Cuthbert Rogers, —

your Petitioner's (3) Son

(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 Cuthbert Rogers, — to the Crichton Royal Institution, Dumfries, and to sanction the admission into the said Asylum.

(*To be signed by the Party applying*) John Rogers

(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 October, — One thousand nine hundred and five 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,	Cuthbert Rogers.
2. Sex and Age,	Male. 43 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Clerk. Bank and Office.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	Accrington, Lancashire (Edmund's Knoll)
7. Place where Found and Examined,	38 Rock Mount, Accrington.
8. Length of time Insane,	3 weeks.
9. Whether First Attack,	Third Attack.
10. Age (if known) on First Attack,	20 or 21.
11. When and where previously under Examination and Treatment (5)	Cheadle — 1893-4
12. Duration of Existing Attack,	3 weeks.
13. Supposed Cause,	Melancholia.
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 Rogers, (Applicant) 14 Bank Parade, Preston, Lancs. A Sister now in the Institution.
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 appeal thereto. If previously under Asylum or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Sixteenth day of October, — One thousand nine hundred and five.

(*To be signed by the party applying*) John Rogers

T. & A. C.—May 1905.

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, Richard Langford Fitz Gerald,
being a (1) Licentiate of the College of Surgeons and
College of Physicians Ireland,
and being in actual practice as a (2) Physician,
do hereby certify, on soul and conscience, that I have this day, at (3) my house
St James' St Accrington, in the County of
Lancashire separately from any other Medical Practitioner
visited and personally examined (4) Cuthbert Rogers of Rock
Accrington, and that
the said Cuthbert Rogers 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

No initiative – Extreme depression – Suicidal
inclination. –

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Came downstairs at his residence
made tho' other people were below stairs

Name and Medical Designation, Richard Langford Fitz Gerald
LRCS. LRCPI.

Place of Abode Gothic House: Accrington Lan

DATED this 14th 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, James Simpson Clayton
being a (1) Doctor of Medicine,
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) St James's
Accrington, in the County of
Lancashire separately from any other Medical Practitioner
visited and personally examined (4) Cuthbert Rogers of
Rock House. Accrington, and that
the said Cuthbert Rogers 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) States his absolute
inability to move or think, is intensely depressed and
contemplates making away with himself as the
only way out of his troubles. Is usually lively
active – is now motionless & reclusive.

(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. S. Clayton M.D. L.R.C.P.

Place of Abode, Accrington

DATED this 14th day of Oct. 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, 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
Cuthbert Rogers from Preston, , 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 Sixteenth day of October, 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
Asylum to receive therein Cuthbert Rogers
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father.

Signature and Address John Rogers

Date 16th October 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Advocate, Sheriff-substitute
of the Dumfries and Galloway, at Dumfries,
having had produced to me, with a Petition at the instance of (4) John Rogers,
14 Bank Parade, Preston,
Certificates under the hands of Richard Langford Fitzgerald,
and James Simpson Clayton 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)
Cuthbert Rogers, 38 Rock Mount, Accrington, (Cotton Spinner) and that the said
Cuthbert Rogers, 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 Cuthbert Rogers as a patient into the (7) Public Asylum of Crichton Royal Institution, and I authorize (8) his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Cuthbert Rogers, 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.
(8) His, or her.

DATED [at Dumfries] this Eighteenth day of October, One thousand nine hundred and five years.

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution, Dumfries.

[Signature] Geo: Campion

(7) Public, District, Parochial, or Private.

No. 9484.

Cuthbert Rogers.

Adm: 16 October 1905.

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 *Vic., 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, *or his Substitutes—at* Dumfries:

The Petition of William John Austin, Rotheseay, Puget Place, Kuarter, humbly sheweth, that it appears from the subjoined statement and accompanying Medical Certjficates that William John Fortescue Austin, ———

(3) State degree of relationship or other capacity in which the 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 authorise the transmission of the said William John Fortescue Austin, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(To be signed by the party applying) William John Austin

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 17th (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, ...	William John Fortescue Austin.
2. Sex and Age, ...	Male; 22 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, ...	1 Kersland Stnt, Glasgow.
7. Place where found and Examined, ...	The Western Infirmary, Glasgow.
8. Length of Time Insane, ...	Uncertain.
9. Whether First Attack, ...	First.
10. Age (if known) on First Attack, ...	22 years.
11. When and where previously under examination and Treatment, (5)...	—
12. Duration of Existing Attack, ...	Uncertain.
13. Supposed Cause, ...	Uncertain.
14. Whether subject to Epilepsy, ...	Doubtful.
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 his Family known to be or to have been Insane, ...	William John Austin Rotheseay, Puget Place, Kuarter Father. Glamorgan. None.
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 fact, with 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 October, ——— One thousand nine hundred and five.

(To be signed by the party applying) William John Austin

M & E—7016

MEDICAL CERTIFICATE, No. 1.

I, the undersigned, John Carswell,

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.* Member of the Royal College of Physicians in Edinburgh.

being a (1) Licentiate of the Royal College of Physicians Edinburgh and of the Faculty of Physicians & Surgeons Glasgow,

(2) *Physician or Surgeon, or otherwise as the case may be.*

and being in actual practice as a (2) Physician,

(3) *Insert the Street and number of the house (if any), or other like particulars.*

do hereby certify, on soul and conscience, that I have this day, at (3) the Western Infirmary, Glasgow, in the County of Lanark, separately from any other Medical Practitioner

(4) *Insert designation and Residence, and if a Pauper, state so.*

visited and personally examined (4) William John Fortesc Austin, formerly residing there, Clerk. and th

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

the said William John Fortescue Austin, is a

person of unsound mind,

and a proper person to be detained under Ca and Treatment, and that I have formed this opinion upon the followi grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is unable give any rational explanation of his conduct, and he c that he has no recollection of a number of recent occu He states that he occasionally loses consciousness and cann

(7) *State the information and from whom derived.*

his name & address.

2. Other facts (if any) indicating Insanity communicated to me b others: (7) His father states that he has conducted himself a forcible & criminal manner for several years, with reasonable motive or advantage, and has caused co losses to at least two firms. Dr Renton, House Physician, Infirmary, states that he was brought to the Infirmary on Saturday 14 Oct, in a dazed condition and unable to give any account of himself, and that the state in which he was was apparently not caused by drink or drugs."

Name and Medical Designation, } J. Carswell L.R.C.P.E. & L.

Place of Abode, 5 Royal Crescent Glasgow

DATED this 16th — day of October, One thousand nine hundred and five.

MEDICAL CERTIFICATE, No. 2.

I, the undersigned, Ralph Stockman,

(1) *Set forth the qualification entitling the person certifying to grant the Certificate: e.g.* Member of the Royal College of Physicians in Edinburgh.

being a (1) Doctor of Medicine,

(2) *Physician or Surgeon, or otherwise as the case may be.*

and being in actual practice as a (2) physician,

(3) *Insert the Street and number of the house (if any), or other like particulars.*

do hereby certify, on soul and conscience, that I have this day, at (3) the Western Infirmary, Glasgow, in the County of Lanark, separately from any other Medical Practitioner

(4) *Insert Designation and Residence, and if a Pauper, state so.*

visited and personally examined (4) William John Fortesc Austin Clerk temporarily as patient in the Western In and tha

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

the said William John Fortesche Austin, 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) His manner peculiar he cannot remember recent occurrences he no sense of responsibility & no contrition in connection with offences found & decerned

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Dr Renton reported to me that he was brought to the Infirmary by the police who found him in the street unable to remember his name & that his symptoms are due to alcoholism or other

Name and Medical Designation. } Ralph Stockman M.D. F.R.C.P.

Place of Abode, 16 Hamilton Terrace Glasgow

DATED this Sixteenth day of October, One thousand nine hundred and five.

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, John Barswell,
being (1) a Licentiate of the Royal College of Physicians Edinburgh (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) The Western Infirmary, Glasgow, in the County of Lanark, (2) State place of examination.
seen and personally examined William John Fortescue Austin, 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 Barswell L.R.C.P.E. '73

DATED this 17th day of October, 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 Asylum, to receive therein William John Austin to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father

Signature and Address, William John Austin "Rotheray" Page Place Penarth.

Date, 17th October 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

C—

George Campion, Esquire, ~~Advocate~~, Sheriff Substitute (1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute,
~~of~~ of Dumfries and Galloway, at Dumfries, (2) State whether a County or Stewartry.
having had produced to me, with a Petition at the instance of (3) William John Austin, Rotheray, Page Place, Penarth, (3) Insert Name and Designation.
certificates under the hands of John Barswell, and Ralph Stockman, 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 John Fortescue Austin, Portland Hotel, Glasgow, (Patient's Son), and that the said William John Fortescue Austin is a (5) person of unsound mind, (4) Describe him, and if a Pauper, state so.
and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said William John Fortescue Austin as a Patient into the (6) Public Asylum of Crichton Royal Institution, (5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
and I authorise the Transmission to the said Asylum accordingly; (6) Public, District, Parochial, or Private.
and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William John Fortescue Austin which accompanied the said Petition. Three words deleted.

DATED [at Dumfries,] this Twentieth day of October one thousand nine hundred and five years. Three words deleted.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution, (7) Public, District, Parochial, or Private.
Dumfries.

(Signature) Geo. Campion

No. 9485.

William John F. Austin

Adm: 14 October 1905.

No. 9485.

William John F. Austin

Adm: 14 October 1905.

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 in Galloway and his Substitutes,—at Dumfries.

The Petition of William Davidson, Poulton, Moniaive.

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Davidson or Little, your Petitioner's (3) Sister,

(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 Jane Davidson or Little, to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) William Davidson

(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 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,	Jane Davidson or Little.
2. Sex and Age,	Female. 78.
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,	Poulton, Glencaim.
7. Place where Found and Examined,	Poulton, Glencaim
8. Length of time Insane,	about two years.
9. Whether First Attack,	First.
10. Age (if known) on First Attack,	=
11. When and where previously under Examination and Treatment (5)	Not previously in Asylum.
12. Duration of Existing Attack,	In a month has been decidedly worse.
13. Supposed Cause,	Senility.
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 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 Davidson, Poulton, Moniaive. Brother. An uncle was insane.
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 of latest Asylum or Appeal-House. If previously under Medical Treatment or Care, state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 24th day of October, One thousand nine hundred and five.

(To be signed by the party applying) William Davidson

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 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) Peelton, in the Parish of Glencairn, —— in the County of Dumfries, —— separately from any other Medical Practitioner, visited and personally examined (4) Jane Davidson or Little, widow, Peelton, Glencairn, —— and that the said Jane Davidson or Little, —— is a (5) person of unsound 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 appearance & behaviour. Complete forgetfulness of her own name, age &c, failure & nonrecognisible who are about her & whom she has known for years. Restlessness purposeless movements.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) that she is unreasonable, unmanageable. tears her clothes. keeps her room as a water closet - is dirty & dirty in her habits. by Mrs Davidson

Name and Medical Designation, Jas Adamson M.B.V.C.

Place of Abode, Hastings Hall, Dumfries

DATED this 24th 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, John Welsh 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) Peelton, in the Parish of Glencairn, — in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Jane Davidson or Little, widow Peelton, and that the said Jane Davidson or Little is a (5) person of unsound 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 general behaviour and appearance of Senile Dementia. Restless movements. Her Memory is gone & answers questions incoherently. Is at times unable to recognise people well known to her.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Davidson her sister-in-law tells me she is very unreasonable does not know where she is and always wants to go away and needs constant watching. Is very dirty in her habits regard to defacation & micturition. Lets blankets & shawls & subject to delusions & at times struggles with animals she sees in her room.

Name and Medical Designation, J. W. Smith M.B.

Place of Abode, Dunscore.

DATED this Twenty fifth 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, James Alexander Adamson, being (1) a graduate of Edinburgh University, hereby certify, on soul and conscience, that I have this day, at (2) Peelton, Moniaive in the County of Dumfries, seen and personally examined Jane Davidson or Little, 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 Adamson

Dated this 25th day of October, 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 Asylum to receive therein Jane Davidson or Little to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address William Davidson Peelton

Date Oct 25. 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampion, Advocate, Sheriff-Substitute (3) of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (4) William Davidson, Peelton, Moniaive, Certificates under the hands of James Alexander Adamson and John Welsh 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) Jane Davidson or Little, Peelton Moniaive, (Peters Sister), and that the said Jane Davidson or Little, 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 Jane Davidson or Little 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 Jane Davidson or Little, 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.
(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-seventh day of October, One thousand nine hundred and five years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution
Dumfries.

[*Signature*] Geo Lampion

(7) Public, District, Parochial, or Private.

No. 9486.

Jane Davidson or Little

Adm: 26 October 1905.

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,*— at Dumfries:

The Petition of William McGregor, North Hayrigg, Lockerbie,—

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Silias Hamilton (2) Potter or McGregor, 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 Silias Hamilton Potter or McGregor, — 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) William McGregor

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 26th (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,	Silias Hamilton (2) Potter or McGregor.
2. Sex and Age,	Female - 49.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Presbyterian.
6. Previous Place of Abode,	North Hayrigg, Lockerbie.
7. Place where Found and Examined,	ditto.
8. Length of time Insane,	Six weeks.
9. Whether First Attack,	Second attack.
10. Age (if known) on First Attack,	25 years.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution.
12. Duration of Existing Attack,	Six weeks.
13. Supposed Cause,	Worry.
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,	Wife William McGregor - Husband. North Hayrigg Lockerbie. a Son in C.R.I.
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 26th day of October — One thousand nine hundred and five.

(To be signed by the party applying) William McGregor

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) North Hy[ph]. Dryfesdale, ——— in the County of Dumfries ——— separately from any other Medical Practitioner, visited and personally examined (4) Lillias Potter Hamilton or Mrs Gregson, Housewife, North Hapriggs, Lockerbie, ——— and that the said Lillias Potter Hamilton or Mrs Gregson (5) person of unsound 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 nervous excited talks in a rambling incoherent way that her head is burning and her feet cold, that she is galloping consumption in her stomach &c. She sat bed with the clothes drawn up over her head, and her whole conduct & behaviour are maniacal.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband, Mr Wm M'Gregson informs me that she goes on day & night in the above manner & will give no one in the house rest or peace.

Name and Medical Designation, George Irving M.

Place of Abode, Lockerbie

DATED this twenty sixth 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.

(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) The Crichton Royal Institution, Dumfries, ——— in the County of Dumfries, ——— separately from any other Medical Practitioner visited and personally examined (4) Lillias Potter Hamilton or Mrs Gregson, Housewife, North Hapriggs, Lockerbie and that the said Lillias Potter Hamilton or Mrs Gregson (5) person of unsound 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 talkative and excited. Says she is Ambassador for the Lord and must do His work. Rambles on in an incoherent manner about many things.—

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Frederick Hugh Clarke, M.B.

Place of Abode, Charlotte Street, Dumfries

DATED this twenty sixth day of October, ——— One thousand nine 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, George Irving,
being (1) Doctor of Medicine and Master in Surgery,
hereby certify, on soul and conscience, that I have this day, at (2) North Hayrigg
in the County of Dumfries, seen and personally examined
Lilias Potter Hamilton or M'Gregor, 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 Southern Counties Asylum, 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.

George Irving M.D

DATED this twenty sixth day of October 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 Lilias Potter Hamilton or M'Gregor
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband.

Signature and Address William M'Gregor.

Date Oct 26 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion, Advocate, Sheriff Substitute
of ~~Dumfries and Galloway~~, at Dumfries, (1)
having had produced to me, with a Petition at the instance of (2) William
M'Gregor, North Hayrigg, Lockerbie,
Certificates under the hands of George Irving,
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 Lilias ~~Hamilton~~ Potter
~~Hamilton~~ or M'Gregor, North Hayrigg, Lockerbie, (3) Spinster, and that the said
Lilias ~~Hamilton~~ Potter or M'Gregor, 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 Lilias ~~Hamilton~~ Potter or M'Gregor as a Patient into the (4) 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 Lilias Potter ~~Hamilton~~ or M'Gregor, 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 twenty seventh day of October,
One thousand nine hundred and five years. [Five and twenty].

To the Superintendent of the (5) Public
Asylum of Crichton Royal Institution,
Dumfries.

(5) Public, District, Parochial, or Private.

[*Signature*] Geo: Campion

No. 9489.

Lilias Potter Hamilton
or McGregor.

Adm: 26 October 1905.

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) The Sheriff of the (2) ~~Dumfriesshire~~ Stewartry of Dumfries & Galloway and his Substitutes at Dumfries.

The Petition of Margaret Pattinson

10 Victoria Street. Rugby

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that your Petitioner's (3) Sister in Law

(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 Mrs Elizabeth Iremble to the Carlton Institution, and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Margaret Pattinson

(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 October — One thousand nine hundred and five 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 Iremble
2. Sex and Age,	F. 42
3. Married, Single, or Widowed,	Widow
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,	Penrith Cumberland
7. Place where Found and Examined,	
8. Length of time Insane,	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,	Three 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,	
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 L. Pattinson 10 Victoria St Rugby Brother 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 appendix thereto. If not previously under Examination or treatment, so state the fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty seventh day of October One thousand nine hundred and five years.

(To be signed by the party applying) Margaret Pattinson

T. & A. C.—May 1905. 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, Joseph Edward Bowser being a (1) Bachelor of Medicine of the University, Edi and being in actual practice as a (2) Physician & Surgeon do hereby certify, on soul and conscience, that I have this day, at (3) Ravenstone Bassenthwaite, Keswick in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Mrs Elizabeth Tremble, Wid Ravenstone, Keswick and that the said Mrs Elizabeth Tremble is a (5) person of unsound 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)

Mrs Tremble behaves like an insane person, talks incessantly and irrelevantly, declares herself to be impelled by an uncontrollable power to do certain dreadful wickedness

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Pattinson, Ravenstone, Keswick, states in substance that Mrs Tremble accuses them about her of administering noxious drugs to her and of plotting against her health and comfort

Name and Medical Designation, J. Edward Bowser M.B.

Place of Abode, Grassgrave Hall, Penrith

DATED this twenty-fifth 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.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Peter Murray Kerr being a (1) Member of Medicine and Member 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) Mrs Elizabeth Tremble, Widow Ravenstone Keswick and that the said Elizabeth Tremble is a (5) person of unsound 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 unmanageable
declares that persons unknown & the
Obeah unless poisoned without her knowledge
& that her relatives & friends
the Tuttles incessantly and incoherently—

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, Crichton Royal Dumfries

DATED this twenty eighth day of October One thousand nine 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, Robert King Barbour Crawford of Clanyard being (1) Bachelor of Medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Racecastle in the County of Cumberland, seen and personally examined Mrs Elizabeth Trimble, 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, 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.

Robert King Barbour Crawford.

DATED this twenty fifth day of October 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 Asylum to receive therein Mrs Elizabeth Trimble to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Father-in-law

Signature and Address Margaret Pattinson

Date October 25 1905

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) Margaret Pattinson 10 Victoria Street, Rugby, Certificates under the hands of Joseph Edward Bowser 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) Mrs Elizabeth Trimble, Racecastle, Parrenthwaite, Kendal, Westmorland and that the said Mrs Elizabeth Trimble 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 Trimble as a patient into the (6) Public Asylum of Crichton Royal Institution, Dumfries, and I authorize (7) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Elizabeth Trimble 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.
(7) His, or her.

DATED [at Dumfries] this twenty-eighth day of October, One thousand nine hundred and five years.

To the Superintendent of the (6) Public *Asylum of* Crichton Royal Institution Dumfries.

(6) Public, District, Parochial, or Private.

[Signature] Geo. Campion

No. 9488.
Elizabeth Scarlett.
Adm: 24 October 1905.

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. Jane Gayton, 90 Holywood Road, Belfast

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Evelyn Gayton,

(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 Evelyn Gayton, to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) Jane Gayton

(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 October, One thousand nine hundred and five 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 Gayton.
2. Sex and Age,	Female, 35.
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,	90 Holywood Road, Belfast.
7. Place where Found and Examined,	90 Holywood Road, Belfast.
8. Length of time Insane,	6 months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	35.
11. When and where previously under Examination and Treatment (5)	—
12. Duration of Existing Attack,	—
13. Supposed Cause,	Worry over school.
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,	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,	Jane Gayton 90 Holywood Rd Belfast (Mother) 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 date of latest Order or appreciation 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 28th day of October, One thousand nine hundred and five years.

(*To be signed by the party applying*) Jane Gayton

T. & A. C.—May 1905. 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 Moore, being a (1) Fellow of the Royal College of Surgeons Edinb
and being in actual practice as a (2) Surgeon,
do hereby certify, on soul and conscience, that I have this day, at (3) 90 Holywood
Belfast, in the County of
Down, separately from any other Medical Practitioner,
visited and personally examined (4) Evelyn Gayton,
and that
the said Evelyn Gayton, is a (5) 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: (6) Very restless
and, believes someone plotting against her. Believes
she is lost eternally and has strong suicidal
tendencies.

(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 Moore M

Place of Abode, College Sqr north Belf

DATED this 26th 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.

(6) *State the facts.*

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
do hereby certify, on soul and conscience, that I have this day, at (3) Cavehill
Royal Institution, in the County
of Antrim, separately from any other Medical Practitioner
visited and personally examined (4) Evelyn Gayton, Spinster,
90 Holywood Road, Belfast, and that
the said Evelyn Gayton, is a (5) person of
unsound 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 maniacal and excited.
Cannot answer any reasonable
question. Rushes wildly about muttering
to herself.

(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, 24 Castle Street Belfast

DATED this twenty eighth day of October, One thousand
nine 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, James Moore M.R.C.S. —
being (1) Surgeon.
hereby certify, on soul and conscience, that I have this day, at (2) 90 Holywood Road Belfast
in the County of Down. (Belfast), seen and personally examined
Evelyn Gayton, ——, 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, Scotland;

(1) State medical qualifications.
(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 Moore

DATED this 28th day of October, — One thousand ~~nine~~
nine hundred and five 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 Institution
Asylum to receive therein Evelyn Gayton,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Mother

Signature and Address Jane Gayton

Date 28th October 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Lampson, (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) ~~James~~
~~Gayton, 90 Holywood Road, Belfast,~~
Certificates under the hands of James Moore
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) Evelyn
Gayton, 90 Holywood Road, Belfast, (Petn's Daughter), and that the said
Evelyn Gayton, 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 Evelyn Gayton as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Evelyn
Gayton, 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.
(7) His, or her.

DATED [at Dumfries,] this Thirtieth day of October,
One thousand nine hundred and five years.—

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries.

[Signature] Geo Lampson

(6) Public, District, Parochial, or Private.

No. 9489.
Evelyn Dayton
Adm: 28 October 1905.

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 Laing, Inspector of Poor for the Parish of Annan:

Humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that mary aitchison, ——— your Petitioner's (2) Pauper, ———

(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 mary aitchison, ——— to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) John Laing

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 30th (3) 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 aitchison.
2. Sex and Age,	sex female. age 40 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,	Hecklegirth. Annan.
7. Place where Found and Examined,	2 johnstone street, Annan.
8. Length of time Insane,	4 days.
9. Whether First Attack,	no
10. Age (if known) on First Attack,	first attack about 1 month ago.
11. When and where previously under Examination and Treatment (3)	medical treatment only at home.
12. Duration of Existing Attack,	4 days.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	doubtful.
16. Whether Dangerous to others,	doubtful.
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,	John Aitchison. masons. Landhead. Annan - brother - no member of family known to have been insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

(3) Patient has already in an Asylum, state date of latest or appreciation to. If already under medical or treatment fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 30th day of October, One thousand nine hundred and five.

(*To be signed by the party applying*) John Laing

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, Wm Elder
being a (1) Bachelor of Medicine & Surgery, 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) 2 Johnstone Street, Annan, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Aitchison, a pau
and that the said Mary Aitchison is a (5) person of unsound 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)
involency, restlessness.
rambling statements
with varied delusions.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Woodhouse (sister) states that she talks nonsense incessantly, states things are talking on her

Name and Medical Designation, Wm Elder M.B.C.S.
Place of Abode, St Johns Villa Annan

DATED this 28th day of October, One thousand nine hundred and four.

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, Cromarty Blair Lucas,
being a (1) Licentiate of the Royal College of Physicians & Surgeons Edinburgh, Medical Practitioner,
and being in actual practice as a (2) 2 Johnstone St
do hereby certify, on soul and conscience, that I have this day, at (3) Annan, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Mary Aitchison 2 Johnstone St Annan and that the said Mary Aitchison, 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)
Suffers from delusions.
Fancies people are talking about her behind her back.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Woodhouse (sister of patient) states that the delusions are incessant. She fancies that people are talking on her

Name and Medical Designation, C B Lucas L.R.C.P.
Place of Abode, Annan

DATED this 28th 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, Crawford Blair Lucas, being (1) Licentiate of the Royal College of Physicians Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) 2 Johnstone Terrace, Annan, in the County of Dumfries, seen and personally examined Mary Aitchison, 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.

(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 B Lucas L R C P & S E.

DATED this 29th day of October, — 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 Asylum to receive therein Mary Aitchison 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 30 October 1905.

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) John Laurie, Inspector of Poor, Annan, Certificates under the hands of William Elder, and Crawford Blair Lucas, 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 Aitchison, 2 Johnstone Terrace, Annan, a pauper, and that the said Mary Aitchison, 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 Aitchison, 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 Aitchison 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 thirty-first day of October, One thousand nine hundred and five 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. 9490.

Mary Aitchison.
(Annan)

Adm: 30 October 1905.

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 and Galloway and his Substitutes,—

The Petition of Rev. Mulroy Inspector of Poor Parish of Dalry as Steward of Kirkcudbright.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Gillespie Boltart 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 Robert Gillespie Boltart to the Crighton Royal 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*) Rev Mulroy

(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 October One thousand nine hundred and four

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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,	Robert Gillespie Boltart
2. Sex and Age,	Male aged 64 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Shepherd
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Poorhouse Kirkcudbright
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	
9. Whether First Attack,	No
10. Age (if known) on First Attack,	57 years
11. When and where previously under Examination and Treatment (5)	Crighton Royal Institution
12. Duration of Existing Attack,	four days
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,	Parish of Dalry Kirkcudbright Shire
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 Relative 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 appointment 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 thirty first day of October One thousand nine hundred and five

(*To be signed by the party applying*) Rev Mulroy

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 Jackson Mc Adam being a (1) Bachelor of Medicine and Master in Surgery and being in actual practice as a (2) Physician do hereby certify, on soul and conscience, that I have this day, at (3) Kirkcudbright Combination Poorhouse in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Robert Gillespie Coltart, pauper, in the above place and that the said Robert Gillespie Coltart 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) Has absolute no knowledge of ~~his~~ where he is, or how he came from, and has absolutely no interest in himself or his surroundings. He is very excitable.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Douglas, in charge at the above Poorhouse informs me that he is prone to acts of violence and frequently has attempted to injure the other inmates. His habits are very deprecation. We are very unsteady.

Name and Medical Designation, David Jackson Mc Adam

Place of Abode, 48 St. Cuthbert St. Kirkcudbright

DATED this 31st day of October One thousand nine hundred and five

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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, Wm Lowndes Spence Reid being a (1) Bachelor of Medicine Master of Surgery in the University of 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) Kirkcudbright Combination Poorhouse in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Robert Gillespie Coltart and the said Robert Gillespie Coltart is a (5) person of unsound 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)

Incoherent in his ideas - Is quite unable to remember what has happened a short time ago. Is very excitable.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

He attacked another inmate with a porcelain article cutting his lip & this I learn from Mr Lowndes.

Name and Medical Designation, W. L. S. Reid M.B. C.M.

Place of Abode, Oakley Kirkcudbright

DATED this 30th 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, David Jackson Mc adam
being (1) a Bachelor of Medicine & Master in Surgery (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) Kirkcudbright Combination of these examination. examination.
in the County of Kirkcudbright, seen and personally examined
Robert Gillespie Collart, 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.

David Jackson Mc adam M.B. C.M.

DATED this 31st day of October 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

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 Twaalyman Napier Esq (2) Advocate Sheriff Substitute
~~of the~~ (2) of Dumfries and Galloway of at Kirkcudbright —
having had produced to me, with a Petition at the instance of (3) Alexander Milroy (2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(4) Insert Name and Designation.

Certificates under the hands of David Jackson Mc Adam
and William Swanston Greene 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 (4)
Robert Gillespie Collart Combination Row Kirkcudbright and that the said
Robert Gillespie Collart is a (5) Pauper (4) Describe him, and if a Pauper, state so.
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to (5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
receive the said Robert Gillespie Collart as a Patient into the
Dumfries & Galloway Combined Asylum of Dumfries 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 Robert Gillespie Collart which accompanied the said Petition.

DATED [at Kirkcudbright] this thirty first day of October One thousand nine hundred and five

To the Superintendent of the (7)
Dumfries & Galloway Combined Asylum of Dumfries. (7) Public, District, Parochial, or Private.

[Signature] Lawrence T. Napier

No. 9491.

Robert Gillespie Collart.

(Daly)

Adm: 31 October 1905.

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 Dumfries and Galloway —— *and his Substitutes,*— at 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 Margaret Currie or Brown, Copland St. Dalbeattie, 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 Currie or Brown, —— to the Crichton Royal Asylum, Dumfries, 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. M. Austin.

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this thirtieth (3) 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,	Margaret Currie or Brown.
2. Sex and Age,	Female. 73 years.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	House wife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Copland street, Dalbeattie.
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	Indefinite.
9. Whether First Attack,	Yes. ✓
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (2)	Has not been under treatment before.
12. Duration of Existing Attack,	a month or two.
13. Supposed Cause,	cannot tell.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	not so far as I know.
16. Whether Dangerous to others,	do. do.
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,	a son, James Brown, John Street Dalbeattie. I don't think so.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	✓

(2) If patient has previously in an Asylum, state date of latest Order or appointment 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 thirtieth day of October, — One thousand nine hundred and five.

(*To be signed by the party applying*) J. M. Austin

P. P.

T. & A. C.—May 1905.

MEDICAL CERTIFICATE. No. I.

I, the undersigned, R. A. Thos. Verchat. M.B. & C.M.
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) Coplaw
Street Dalbeattie
Kirkcudbright, separately from any other Medical Practitioner,
visited and personally examined (4) Widow Brown, a Pauper
and that the said Widow 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) For months past
Shame known her to be of unsound mind from
her public Conduct and in Consultation She
is Insane.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr. Thomson, Inspector of Poor tells me she
is becoming a public Nuisance in that She troops
her Neighbours without provocation

Name and Medical Designation, R. No. Verchat

Place of Abode, Dalbeattie

DATED this Fifteenth day of October One thousand
nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert 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 Archibald David Gillespie,
being a (1) Bachelor of Medicine & Master in Surgery (Univ. of
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) Coplaw
Street Dalbeattie
Kirkcudbright, separately from any other Medical Practitioner,
visited and personally examined (4) Margaret Brown,
and the said Margaret 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)
Roams about the street & behaving in an obscene
manner. Have known her to be mentally
affected for many years. Her present attack
may be aggravated by excessive drinking.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
William Bell & several neighbours tell me
she wanders about the streets at all hours
making disturbing the whole neighbourhood
by obscene in her behaviours & profane in
her daily language.

Name and Medical Designation, Jas. D. Gillespie

Place of Abode, Dalbeattie

DATED this thirteenth day of October, One thousand
nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert 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, Samuel Archibald David Gillespie — being (1) Bachelor of Medicine & Master of Surgery, — hereby certify, on soul and conscience, that I have this day, at (2) Dalbeattie in the County of Kirkcudbright — , seen and personally examined Margaret 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) 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.

S A D Gillespie

Dated this thirtieth — day of October, — 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 Asylum to receive therein Margaret Currie or Brown to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor

Signature and Address M. Austin Dalbeattie.

Date 30 Oct. 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Advocate, Sheriff Substitute of the Dumfries & Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) James Menzies Austin Inspector of Poor, Urr, Dalbeattie, Certificates under the hands of Robert McKercher, — and Samuel Archibald 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 (6) Margaret Currie or Brown, Copland Street, Dalbeattie, (Pauper) and that the said Margaret Currie or Brown, 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 Currie or Brown — as a patient into the (8) Public Asylum of Crichton Royal Institution, and I authorize (9) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Currie or Brown — which accompanied the said Petition.

(5) 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.
(9) His, or her.

Dated [at Dumfries] this First day of November, One thousand nine hundred and five years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution Dumfries.

Geo. Campion

[Signature]

(8) Public, District, Parochial, or Private.

No. 9492.

Margaret Currie or Brown.
(Urr)

Adm: 31 October 1905.

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 Mackie, Inspector of Poor of the Parish of Wigtown

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Bessie Hannah, Glenlurk Cothouse

(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 Bessie Hannah to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Wm Mackie

(4) The date of the Petition must be within fourteen clear days ~~eight hundred and~~ following the dates of the Medical Certificates.

DATED this Thirtieth (4) day of October One thousand nine hundred and five 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,	Bessie Hannah
2. Sex and Age,	Female, 24 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Pauper, Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Glenlurk Cottages
7. Place where Found and Examined,	Glenlurk Cottages
8. Length of time Insane,	Has had two attacks in last seven years
9. Whether First Attack,	no
10. Age (if known) on First Attack,	17 years
11. When and where previously under Examination and Treatment (5)	S.C. Asylum (twice)
12. Duration of Existing Attack,	about 8 days
13. Supposed Cause,	Fright
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,	Wigtown (meantime Formerly Whithorn
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,	Her mother Mary Hannah resides at Glenlurk Cottages, near Wigtown None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Has been in S.C. Asylum about 3 months seven years ago & about 9 months 1¼ years ago

(5) If patient has previously in an Asylum, state the date of latest admission or approximate thereto. If previously under Asylum or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirtieth day of October One thousand nine hundred and five years

(To be signed by the party applying) Wm Mackie, Inspector of poor

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, Norman James McVie
being a (1) Doctor of Medicine and Master in Surgery of
University of Edinburgh
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) Glenburn Cottage Wigtown in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Bessie Hannah, pauper Glenburn Cothouse, Wigtown and that the said Bessie Hannah 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) Hair and clothing in disorder. Face twitching. Has bitten her left hand & her foot. Will not answer when spoken to, but talks incoherently and at random when left alone.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Donnachie Glenburn Cothouse
Is destructive, restless, abusive and violent

Name and Medical Designation, Norman James McVie M.D.

Place of Abode, 164 Colton Street, Newton Stewart

DATED this twenty-ninth day of October One thousand ~~eight~~ nine hundred and five

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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 Henry Murray-Aynsley
being a (1) Member of the Royal College of Surgeons of Eng. & Licentiate of the Royal College of Physicians of Edin.
and being in actual practice as a (2) Surgeon & Physician
do hereby certify, on soul and conscience, that I have this day, at (3) Glenburn Cottage in the Parish of Wigtown in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Bessie Hannah: pauper Spinster - Cothouse Glenburn and that the said Bessie Hannah 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) Hair & clothing in disorder & Person unkempt - restless in demeanour - at times incoherent - in conversation - states she once went to church does not know dynamite wished to be a lady governess & she found a skeleton constantly by her bed at times talked gibberish Reflexes left foot - requires immediate attention

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Donnachie (Mother of patient)
states she is abusive & violent - has destroyed clothing &c. (I was shown a watch she had destroyed in one of her violent attacks)

Name and Medical Designation, J H Murray-Aynsley

Place of Abode 11 Main Street - Wigtown

DATED this 30th day of October One thousand ~~eight~~ 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,
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, 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) William Mackie
Inspector of Poor of the Parish of Wigtown
Certificates under the hands of Norman James McKie MB Cm medical officer and John Henry Murray Assistant Surgeon Physician 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)
Bessie Hannah, pauper, Othouse Penfrish and that the said
Bessie Hannah is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Bessie Hannah 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 Bessie Hannah 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 thirtieth day of October
One thousand ~~eight~~ nine hundred and five.

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

[Signature] Eben Shaw

(7) Public, District, Parochial, or Private.

No. 9493.

Bessie Hannah.

(Brighton)

Adm: 31 October 1905.

N.B.—*This Form shall vary in the wording of the commencement of the Application to the Order of the Sheriff thereof.*

[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 Wilson, 39 West Road, Moine, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Mary Scott or Wilson, 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 authorize the transmission of the said Mary Scott or Wilson ——— 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 related.

(To be signed by the Party applying)..... Wm. Wilson ×

(2) The date of the Petition must be within four clear days following the dates of the Medical Certificates.

DATED this Sixth (2) day of November, ———
One thousand ~~eight~~ 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 Scott or Wilson.
2. Sex and age,	Female. 48 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,	39 West Road, Moine.
7. Place where found and examined,	Do.
8. Length of time Insane,	
9. Whether First Attack,	No. Second.
10. Age (if known) on First Attack,	44 years.
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 — December 1904 to May 1905.
12. Duration of Existing Attack,	
13. Supposed Cause,	Drink.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	Violent.
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 Wilson. 39 West Road. Moine. (Husband) — 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 Fourth day of November, One thousand ~~eight~~ nine hundred and five years.

(To be signed by the Party applying)..... Wm. Wilson ×

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 Thomson
being a (1) doctor of Medicine and Master in Surg
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) 39 West Ro
Irvine,
Ayr, in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Mary Scott or
Wilson and that
the said Mary Scott 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)
Screaming at the pitch of her voice in a
most excited state of blaming family affairs
her relatives &c and altogether mismanagement. Her tem
was boiling over and her chain to moment like going for a

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her nephew Gladstone Small informs me that
has frequently seen her praying in an excited ma
& that she is frequently under the influence of alc
will go out of doors & any article at any time for the sake of obtai

Name and Medical Designation, James Thomson M D
Irvine
Place of Abode,

DATED this fourth day of November, — 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, James Wilson,
being a (1) doctor of Medicine & Bachelor of Surgery
and being in actual practice as a (2) medical practitioner
do hereby certify, on Soul and Conscience, that I have this day, at (3) 39 West Ro
Irvine,
Ayr, in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Mary Scott or Wilson
and that
the said Mary Scott 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) Shouting & scream
at the pitch of her voice extreme excite
incoherence of speech. refuses & takes food
insomnia & dotal. she does not take stimula

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
From her Nephew, Frequent outbursts of temper
(Mr. Gladstone Small) excitement makes handling obst

Name and Medical Designation, James Wilson M.D. Ch B
Redhurst, Irvine.
Place of Abode,

DATED this fourth day of November, — 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, James Thomson
being (1) M. D. 1876. M. 7 Clerk Irvine. (1) State medical qualification.
hereby certify, on Soul and Conscience, that I have this day, at (2) 39 West Burn (2) State place of examination.
Irvine
in the County of Ayr, seen and personally examined
Mary Scott or Wilson, and that the said
Person is of unsound mind, and a proper Patient to be placed in an Asylum. Myself Dr Gribbin Institution
And I further certify that the case of the said Person is one of Emergency. and that
the patient is in a fit state of health for removal.
James Thomson M. D. F. C. M.

DATED this fourth 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 at Dumfries, to receive therein Mary Scott or Wilson,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband.

Signature and Address, Wm. Wilson 39 West-17 Cr Irvine

Dated 4th November 1905.

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) William Wilson, 39 West Road, Irvine. (1) Insert Name and Designation.
Certificates under the hands of James Thomson,
and James Wilson, , 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 Scott or Wilson, 39 West Road, Irvine (Petitioner's wife,) (2) Describe him, and if a Pauper, state so.
and that the said Mary Scott or Wilson, 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 AUTHORIZE YOU to receive the said Mary Scott or Wilson — 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 to you herewith the said Medical Certificates, and a Statement regarding the said Mary Scott or Wilson — which accompanied the said Petition.

DATED this Sixth day of November, One thousand ~~eight~~ nine hundred and five years. Four words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo. Campion

No. 9494

Name, Mary Scott or Wilson.

Date of Admission, 4th November 1905.

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 David Doughty game dealer Whittorn

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Doughty 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 George Doughty to the Southern Counties 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) David Doughty

DATED this fifth (4) day of November 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,	George Doughty
2. Sex and Age,	Male 24
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Assistant game dealer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	—
7. Place where Found and Examined,	Whittorn
8. Length of time Insane,	4 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,	4 months
13. Supposed Cause,	Drinking
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. 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 Doughty father no
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 of Asylum and date of latest admission, approximately if not known. If previously under Medical Treatment, state where.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fifth day of November One thousand nine hundred and five

(To be signed by the party applying) David Doughty

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 Fleming Smith
being a (1) Bachelor of Medicine & Master of Surgery of the [illegible]
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) 10 Whitt[illegible]
in the Coun[illegible] of
Lisdown separately from any other Medical Practitioner,
visited and personally examined (4) George Doughty Assistant
and [illegible]
the said George Doughty is a (5) person of
unsound 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 his huddled up in bed, refuses to rise & wash. says that the Saviour has told him about people trying to make [illegible]ments against him. [illegible] is extremely irritable

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His father David Doughty tells me that he threatens to attack his mother when she tells him stories about the [illegible] Also that he has refused food for two days

Name and Medical Designation, James F. Smith M.B. [illegible]

Place of Abode, 74 George St Whitburn

DATED this fifth day of November 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.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, John Hanney Douglas
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) 33. Geo[illegible]
St. Whitburn in the Count[illegible] of
Lisdown separately from any other Medical Practitioner,
visited and personally examined (4) George Doughty. Assistant
Game Dealer Whitburn and [illegible]
the said George Doughty is a (5) person of
unsound 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 refuses to take his food or to rise from his bed. Says that his Saviour supplies him with food

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His father David Doughty informs me that he is very irritable and would very likely strike me going to see him.

Name and Medical Designation, J. H. Douglas. M. B. C. M.

Place of Abode, St. Anniversary Whitburn

DATED this fifth day of November 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,
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, William Mackie Esquire (1) Sheriff Substitute
of the (2) Dumfries and Galloway (of)
having had produced to me, with a Petition at the instance of (4) David Doughty game dealer Whithorn and
Certificates under the hands of James Fleming Smith M.B.C.M. Whithorn
and John Hannay Douglas 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 (5) George Doughty, Private, and that the said George Doughty 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 George Doughty as a Patient into the (7) 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 Doughty which accompanied the said Petition.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) 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 Kirkcudbright] this fifth day of November One thousand nine hundred and five

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

[Signature] Wm Mackie

(7) Public, District, Parochial, or Private.

No. 9495.

George Doughty.

Aden: 6 November 1905.

[Form A]

N.B.—*This form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

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 Mary Agnes Morant 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 Mary Agnes Morant 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 Ninth (*) day of November One thousand nine hundred and five 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 Agnes Morant.
2. Sex and age,	Female. 36 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous occupation (if any),	Short time Governess.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous place of abode,	Crichton Royal Institution.
7. Place where found and examined,	Do.
8. Length of time Insane,	15 months
9. Whether First Attack,	No.
10. Age (if known) on First Attack,	19 years.
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	At Dr. Hume's Nursing Home Holburn + Crichton Royal Institution. Fifteen months.
12. Duration of Existing Attack,	—
13. Supposed Cause,	No.
14. Whether Subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Dumfries at present.
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 Bell. Manse of Hillesates Ashkirk - (Sister)
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 Ninth day of November One thousand nine hundred and five years

(To be signed by the party applying).....Miles Mc Innes

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, James Rutherford
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) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical practitioner, visited and personally examined (4) Miss Mary Agnes Morant pauper Volunteer patient in Crichton Royal Institution and that the said Mary Agnes Morant is a (5) person of unsound 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) Lying in bed singing shouting, waving her hands and appearing to be quite maniacal.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name of Medical Designation, James Rutherford ch.M.

Place of Abode, Crichton House, Dumfries

DATED this Sixth day of November — 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, 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) Mary Agnes Morant pauper inmate Royal Institution and that the said Mary Agnes Morant is a (5) person of unsound 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 and excitable talks incessantly and sometimes incoherently.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name of Medical Designation, Peter Murray Kerr M.B. C.M.

Place of Abode, 20 Castle Street Dumfries

DATED this Eighth day of November One thousand nine hundred and five years

CERTIFICATE OF EMERGENCY.

(This Certificate authorises the detention of a Patient in an Asylum for a period not exceeding three days without an 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
Mary Agnes Morant, 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.

(1) State Medical qualification.
(2) State place of Examination.

And I further certify that the case of the said person is one of Emergency.

James Rutherford

DATED this Sixth 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 at Dumfries to receive therein Mary Agnes Morant
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister of Poor

Signature and Address, Miles Mc Innes 38 Queen St Dfs.

Date, 9 nov 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campion Esq 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 James Rutherford
and Peter Mowat Kerr, being two Medical Persons duly qualified in terms of an Act entituled "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 Agnes Morant, Crichton Royal Institution, Dumfries
and that the said Mary Agnes Morant 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 Agnes Morant 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 Mary Agnes Morant, 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 Ninth day of November One thousand nine hundred and five years. The printed words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo Campion

No. 4645

Name, Mary Agnes Thotant
(Mrs)

Date of Admission, 6 November 1905

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 James Morrison Inspector of Poor, of the Parish of Dryfesdale,—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Archibald Mackay, 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 Archibald Mackay, to the Crichton Royal Institution, and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Peti. stands to Lunatic.

(To be signed by the Party applying) James Morrison

(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 November, One thousand nine hundred and five 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 Mackay.
2. Sex and Age,	Male 47 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	No occupation for over 20 years.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	old Police Station, Lockerbie.
7. Place where Found and Examined,	Mentally weak for over 20 years.
8. Length of time Insane,	Yes.
9. Whether First Attack,	about 19 years.
10. Age (if known) on First Attack,	Never certified all his mentally week.
11. When and where previously under Examination and Treatment (5)	about 27 years.
12. Duration of Existing Attack,	Not Known.
13. Supposed Cause,	No.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Yes when excited.
16. Whether Dangerous to others,	Dryfesdale.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	James Mackay. - Father.
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,	old Police Station, Lockerbie.
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 Seventh day of November,— One thousand nine hundred and five.

(To be signed by the party applying) James Morrison

T. & A. C.—Sept. 1903.

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.*

(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.

I, the undersigned, James Maclachlan
being a (1) Bachelor of Medicine & Master in Surgery 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) Old Police Station Lockerbie, Dryfesdale Parish — in the County of Dumfries, — separately from any other Medical Practitioner, visited and personally examined (5) Archibald Mackay, Old Police Station, Pauper, — and that the said Archibald Mackay, — 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.:—

(4) *State the facts.*

1. Facts indicating Insanity observed by myself: (4) Sat at the fire in a dayroom of jail with blank expressionless countenance while I spoke to his father taking a letter to one prisoner & medicine to another, not taking it in. Said that he did so much because it was his custom.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) James Mackay, his father, states that he has been so for many years. He has been at times very excited, stamping his feet & swearing & one or twice has been violent. He takes no interest in anything & never goes out of the

Name and Medical Designation, James Maclachlan M.B.

Place of Abode, Lockerbie

DATED this 6th day of November, 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.*

(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.

I, the undersigned, George Irving,
being a (1) Doctor of Medicine & Master in 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) Old Police Station Lockerbie, Dryfesdale, — in the County of Dumfries, — separately from any other Medical Practitioner, visited and personally examined (5) Archibald Mackay Old Police Station pauper, — and that the said Archibald Mackay, pauper 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.:—

(4) *State the facts.*

1. Facts indicating Insanity observed by myself: (4) He sits by the fire quiet and taciturn, never speaks except when spoken to, never does any work because he says he has never got into the way of it, and his demeanour is peculiar and strange.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His father James Mackay informs me that he asks him to do any thing, he becomes very excited & conducts himself in a furious and insane manner.

Name and Medical Designation, George Irving M.B.

Place of Abode, Lockerbie

DATED this seventh day of November, 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, George Irving, being (1) Doctor of Medicine and Master in Surgery, hereby certify, on soul and conscience, that I have this day, at (2) Old Police Station, Lockerbie in the County of Dumfries, seen and personally examined Archibald MacKay, Painter, 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, ~~or~~ and place of examination.

(2) State place at which Asylum is situated.

George Irving M.D

DATED this seventh 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 Archibald MacKay, 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 7th November 1905.

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) James Morrison, Inspector of Poor, Dryfesdale, Certificates under the hands of James MacLachlan, and George Irving, 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) Archibald MacKay, Old Police Station, Lockerbie (a pauper) and that the said Archibald MacKay 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 Archibald MacKay 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 Archibald MacKay 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.
(8) Public, District, Parochial, or Private.

DATED [at Dumfries] this Eighth day of November, One thousand nine hundred and five years. Two words deleted.

To the Superintendent of the (9) Public *Asylum of* Crichton Royal Institution, at Dumfries.

[*Signature*] Geo. Campion

(9) Public, District, Parochial, or Private.

No. 9499.

Archibald Mackay.

(Dryfesdale)

Adm: 4 November 1905.

[Form A]

N.B.—*This form shall remain in the keeping of the Superintendent of the Asylum after the Order of the Sheriff is obtained.*

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 Craik 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 Craik 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 date of the Medical Certificates.

Dated this Ninth (*) day of November One thousand nine hundred and five 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 Craik
2. Sex and age,	male - 46
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous occupation (if any),	Ostler
5. Religious Persuasion, so far as known,	Protestant
6. Previous place of abode,	Poorhouse Dumfries
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,	is
11. When and where previously under Examination and treatment. (Name of Establishment into which last received, and Year of Reception or approximation thereto,	Nowhere
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,	6th Jany 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,	None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Ninth day of November One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

C.O. 0498.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grand the certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert 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) Dumfries House ——— in the County of Dumfries ——— separately from any other Medical practitioner, visited and personally examined (4) James Craik pauper Dumfries House Dumfries ——— and that the said James Craik ——— is a (5) person of unsound 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 irritable and excitable
Rushes madly up and down
Is at times stupid & confused
Cannot answer any reasonable

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others : (7)

The matron Mrs Smellie informs me
that he becomes very angry if spoken
and that he takes off all his clothes
around him

Name of Medical Designation, } Peter Murray Kerr M.B.

Place of Abode, 20 Castle Street Dumfries

DATED this ninth day of November One thousand nine hundred and five years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grand the certificate: e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise as the case may be.*

(3) *Insert the Street, and number of the house (if any), or other like particulars.*

(4) *Insert 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) 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) The Poorhouse Dumfries ——— in the County of Dumfries ——— separately from any other Medical Practitioner, visited and personally examined (4) James Braill pauper Poorhouse Dumfries ——— and that the said James Braill ——— is a (5) person of unsound 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 manner and appearance
His incoherent conversation

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others : (7)

The matron (Mrs Smellie, Poorhouse Dumfries)
tells me that he takes off his clothes &
runs about naked. That he is violent
towards other patients.

Name of Medical Designation. } George R Livingston M.D.

Place of Abode, 4 Castle Street Dumfries

DATED this ninth day of November One thousand nine hundred and five years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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 Keer
being (1) Graduate Medicine
hereby certify, on Soul and Conscience, that I have this day, at (2) Moorhouse
in the County of Dumfries, seen and personally examined James Craik, 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.

(1) State Medical qualification.
(2) State place of Examination.

And I further certify that the case of the said person is one of Emergency.

Peter Murray Keer

DATED this ninth day of November One thousand nine hundred and five 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 James Craik
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 St Dfs.

Date, 9th Nov 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, George Campson, Sheriff-Substitute of ~~the County of~~ 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 Keer,
and George Robert Livingstone, being two Medical Persons duly qualified in terms of an Act, entitled "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 Craik, the Poorhouse, Dumfries. (a Pauper).
and that the said James Craik 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 Craik as a patient into the Crichton Royal Institution for Lunatics, at Dumfries, and I authorise this Transmission to the said Institution accordingly; and I transmit you herewith the said Medical Certificates, and a statement regarding the said James Craik 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 Ninth day of November One thousand nine hundred and five years. Three pointed words deleted.

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

Geo. Campson

No. 9498.

9 - 2

10 - 2

5 - 5

Name, James Craik.
(Duffs)

Date of Admission, 9 November 1905.

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 Samuel Dickson Morrison, Inspector of Poor, Whitlom

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Cain 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 David Cain to the Southern Counties 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*) S. D. Morrison

(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 November One thousand nine hundred and five

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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,	David Cain
2. Sex and Age,	male 16
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Boy
5. Religious Persuasion, so far as known,	Prot.
6. Previous Place of Abode,	Whitlom
7. Place where Found and Examined,	do.
8. Length of time Insane,	Congenital
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*],	Nov. 1903 Private Dwelling Isle St. Whitlom, under the guardianship of his mother Congenital.
12. Duration of Existing Attack,	
13. Supposed Cause,	
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,	Whitlom Parish Council
18. Date of becoming Chargeable,	17th Nov. 1903
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,	Grace Edgar, Isle St. Whitlom Mother of Lunatic-named in father-Lake Cain 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 fourteenth day of November One thousand nine hundred and five

(*To be signed by the party applying*) S. D. Morrison

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, James Fleming Smith being a (1) Bachelor of Medicine Master of 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) Whitburn in the Parish of Whitburn in the County of Lothian separately from any other Medical Practitioner, visited and personally examined (4) David Cain pauper and that the said David Cain is a (5) person of unsound 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 has been weak minded from childhood. He cannot speak clearly, takes almost no interest in his surroundings, constantly sways his body backwards & forwards & plays with his

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His mother Mrs Grace Cain informs me that he has always been weak minded, that he can do little for himself, that he is very restless irritable & takes fits

Name and Medical Designation, James F. Smith M.B. C.M.

Place of Abode, 5 George Street Whitburn Lothian

DATED this Thirteenth day of November One thousand eight hundred and five

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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 Hannay Douglas being a (1) M.B.C.M. 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) 46 Church Whitburn, in the Parish of Whitburn in the County of Lothian separately from any other Medical Practitioner, visited and personally examined (4) David Cain a pauper and that the said David Cain is a (5) person of unsound 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 continually sways his body backwards and forwards, plays with a spoon and cannot answer questions.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His brother, Mrs Grace Cain, informs me that he takes fits, tears the bedclothes and is very irritable

Name and Medical Designation, J. H. Douglas

Place of Abode St. Ninians Whitburn

DATED this Fourteenth day of November One thousand eight 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,
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 Esquire (1) Sheriff Substitute
of the (2) Dumfries and Galloway of
having had produced to me, with a Petition at the instance of (3) Samuel Dickson
Morrison Inspector of Poor Whitborne and
Certificates under the hands of James Fleming Smith M.B.C.M. Whithorn
and John Hannay Douglas 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)
David Cain Pauper
David Cain and that the said
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 David Cain 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 David Cain 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 ~~of~~ November One thousand ~~eight~~ nine hundred and five

Eben Shaw

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

(7) Public, District, Parochial, or Private.

No. 9499.

David Cain.

(Hohithorn)

Adm: 15 November 1905.

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 Pickering, ———

45 Newton Road. Ashton on Ribble. Preston.

Humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Pickering, ———

(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 Samuel Pickering, ——— to the Crichton Royal Institution, — and to sanction his admission into the said Asylum.

(*To be signed by the Party applying*) Henry Pickering

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Sixteenth (4) day of November, One thousand nine hundred and five 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 Pickering.
2. Sex and Age,	Male. Thirty one years of age last January.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Electrical Engineer.
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	45 Newton Rd Ashton on Ribble, Preston.
7. Place where Found and Examined,	45 Newton Rd Ashton on Ribble, Preston.
8. Length of time Insane,	Nine Months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	31 years.
11. When and where previously under Examination and Treatment (3)	No.
12. Duration of Existing Attack,	Nine 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,	Henry Pickering, 45 Newton Rd. Ashton on Ribble, Preston, Brother. — No.
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 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 November, One thousand nine hundred and five years.

(*To be signed by the party applying*) Henry Pickering

T. & A. C.—May 1905.

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 Henry Seed
being a (1) Bachelor of Medicine & Master in Surgery 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) 45 Newton Rd
Ashton-in-Ribble, Preston, in the County of
Lancaster, separately from any other Medical Practitioner,
visited and personally examined (4) Samuel Pickering, Electrical Engineer
45 Newton Rd Ashton-in-Ribble, Preston and that I
the said Samuel Pickering is a (5) Person of
unsound 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 subject to the
delusion that he is under the influence of Satan who
by means of magnetism & electricity, they cause him pain
& inability for work at times almost dragging his arms
from their sockets & paralysing his legs. Says he has & suffers both
giving up his life in the interest of Christ. Talks and listens to his
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
relatives & personal affairs

Name and Medical Designation, W. H. Seed M.B.C.M.

Place of Abode 110 Waterloo Rd Ashton-in-Ribble

Dated this 14th day of November One thousand nine hundred and Five 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, Joseph Eatough Holden
being a (1) Bachelor of Medicine &c 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) 45 Newton
Road, Ashton, Preston, in the County of
Lancaster separately from any other Medical Practitioner,
visited and personally examined (4) Samuel Pickering, 45
Newton Road, Ashton, Preston, and that
the said Samuel Pickering is a (5) person
of unsound 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 delusions
as follows. States his brother William is
about home, when as a fact he is West-Africa.
Head people have a magnetic influence over him
and does render him unfit to work. and causes
pains in his head.
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Frank Moss, attendant states, he sometimes
lies down when out walking, saying he has
paralysed & cannot move though is all
and strong.

Name and Medical Designation, J. E. Holden M.B.C.M.Edin

Place of Abode 95 Fishergate Hill. Preston

Dated this fourteenth day of November — One thousand nine 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, William Henry Seed
being (1) Bachelor of Medicine & Master in Surgery Edin. Univ. (1) State medical qualification.
hereby certify, on soul and conscience, that I have this day, at (2) 45 Newton Rd Ashton (2) State place of examination.
in the County of Lancaster, seen and personally examined,
Samuel Pickering, 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.

Wm H Seed MB CM

DATED this 14th day of November, One thousand nine hundred and five 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 Samuel Pickering,
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address Henry Pickering, 45 Newton Rd. Ashton on Ribble Preston.

Date 15th Nov 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Carruthers, Esquire, Advocate, Sheriff Substitute (1) State whether Sheriff, Sheriff Substitute, Steward, or Steward Substitute.
of the (2) Dumfries and Galloway, at Dumfries, (2) State whether a County or Stewartry.
having had produced to me, with a Petition at the instance of (3) Henry Pickering, (3) Insert Name and Designation.
45 Newton Road, Ashton-on-Ribble, Preston,
Certificates under the hands of William Henry Seed,
and Joseph Eatough Holden 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 Pickering 45 Newton Road Ashton-on-Ribble, Preston, (Patient's Brother), and that the said Samuel Pickering is a (5) person of unsound mind, (4) Describe him, and if a Pauper, state so.
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Samuel Pickering as a patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize (7) His Transmission to the said Asylum accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Samuel Pickering, which accompanied the said Petition. (5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind. (6) Public, District, Parochial, or Private. (7) His, or her.

DATED [at Dumfries] this Sixteenth day of November, One thousand nine hundred and five years.

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries. (6) Public, District, Parochial, or Private.

[Signature] Geo. Carruthers

No. 9500.

Samuel Pickering

Adm: 15 November 1905.

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 Kalloway ——— *and his Substitutes,*— at Dumfries.

The Petition of Alexander Thair, — Neiklehola · Kirkmichael

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jeanie Paterson Thair or Kilgour ——

(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 Jeanie Paterson Thair or Kilgour to the Crichton Royal Institution — and to sanction her admission into the said Asylum.

(To be signed by the Party applying) Alexander Thair

(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 November — One thousand nine hundred and five 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,	Jeanie Paterson Thair. Or Kilgour
2. Sex and Age,	Female 37 years
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,	Dumfries
7. Place where Found and Examined,	Neiklehola Kirkmichael
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
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,	Alex^{r}. Thair Neiklehola Kirkmichael Father No other Member of Family 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 that fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 16th day of November One thousand nine hundred and five

(To be signed by the party applying) Alex^{r}. Thair

T. & A. C.—Sept. 1903. 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 Jupson ——————
being a (1) Bachelor of Medicine of Edinburgh University
and being in actual practice as a (2) general practitioner in Dumfries
do hereby certify, on soul and conscience, that I have this day, at (3) Meikle Kirkmichael ——————— in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) Jeanie Paterson Main or Kilgour widow and that the said Jeanie Paterson Kilgour — is a (5) person of unsound 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 variable in her moods - cautious of her speech
Rambling & incoherent in her talk & has
nonsensical fancies about her relations and
about religious matters

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
That two nights ago she jumped from the
bedroom window (on the Ground storey) & ran
about the farm court and in her night dress

By her father

Name and Medical Designation, Thomas Jupson MB

Place of Abode, 16 Castle St Dumfries

DATED this sixteenth day of November One thousand nine hundred and five 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 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) Meikle Kirkmichael ——————— in the County of Dumfries ——— separately from any other Medical Practitioner visited and personally examined (4) Mrs Jeanie Paterson Main or Kilgour, widow. ——————— and that the said Mrs Jeanie Paterson Main or Kilgour is a (5) person of unsound 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 emotional, Laughing and talking in an Inane and Silly way. She has the appearance and manner of an insane person

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Fred. Hugh Clarke MB Ch.M.

Place of Abode, Charlotte Street Dumfries

DATED this Eighteenth day of November One thousand nine 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, Thomas Ferguson
being (1) Bachelor of Medicine & Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) Meikleholm
in the County of Dumfries, seen and personally examined
Jeanie Paterson Mair or Kilgour, 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.

Thomas Ferguson M.B.Ch.

DATED this Fourteenth day of November One thousand nine hundred and five 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 Jeanie Paterson Mair or Kilgour to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, } Father

Signature and Address Alex^r Mair, Meikleholm

Date November 16th 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Clerk 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) Alexander Mair, Meikleholm, Kirkmichael, Dumfries, Certificates under the hands of Thomas Ferguson, and Fred. 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) Jeanie Paterson Mair or Kilgour, Widow, Meikleholm, Kirkmichael, Dumfries, and that the said Jeanie Paterson Mair or Kilgour is a (5) Lunatic and of unsound mind, and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jeanie Paterson Mair or Kilgour 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 Jeanie Paterson Mair or Kilgour 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 November One thousand nine hundred and five years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution

(7) Public, District, Parochial, or Private.

[*Signature*] Dumfries.

John Clerk

No. 9501.

Jeanie Paterson Clair or
Kilgour.

Adm: 16 November 1905.

OF LUNACY
NOV 1905

APPLICATION T
TRANSFER

I, the undersigned
being desirous to tra
to request a Patient
Under
Medical Superintendent of
Southern
to retain the
Medical Certificate

1. Christian Name
length,

2. Sex and Age,

3. Married, Single,

4. Condition of Life,
(if any),

5. Religious Persua

6. Parish to which t
Chargeable,

7. Christian Name
of Abode of
the Patient,
(if known), a
the Family
Insane,

I certify that,
and I hereby make
Lunacy to the trans

(To be signe

Dated this
hundred and

N.B.—The fo
blanks, are require
to which the Patie

Form L.—May 1905.

BOARD OF LUNACY
17 NOV. 1905

18,038.

[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 Alex Meikle, Inspector of Poor, Leswalt Parish being desirous to transfer Margaret Harvey or Hannah at present a Patient in Stirling District 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,	Margaret Harvey or Hannah
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. Parish to which the Lunatic (if a Pauper) is Chargeable,	Leswalt Parish
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,	John Hannah Husband 34 Sterling Street City of Glasgow

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*) Alex Meikle

(²) Inspector of Poor

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this 16th day of November One thousand ~~eight~~ nine hundred and five.

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 Cooper Robertson

(1) Name Asylum.

hereby certify that I have this day at (1) The Glasgow District Asylum personally examined Margaret Harvey or Hannah who has been a

(2) Insert Date of Admission.

Patient in said Asylum since (2) 17th June 1905 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 not dangerous to others. I also certify, with respect to the Mental State of

(4) Describe Mental State.

the Patient, that (4) She suffers from the Partial Dem & General Paralysis & the Insane; She imagines she is wealthy & about to be married

(5) Describe Bodily State.

and with respect to the Bodily State of the Patient, that (5) it is weak Heart's action feeble. Slight mitral systolic murm Crepitations at base of right left lung. Speech impaired. Deep reflexes exaggerated. Sup do not react to light

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

(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) Cooper Robertson

(Medical Qualification) M.B. F.R.C.P.E.

(Date) Nov. 11th 1905.

No. 9582.
Margaret Harvey or Hannah
(Female)
Adm: 25 November 1905.

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 Harvey or Hannah.
from Stirling 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. Fenwick Secretary Commissioner.

DATED at Edinburgh, this 17th day of November One thousand ~~eight~~ nine hundred and five

Date of Sheriff's Order [*to be inserted at the Office of Board*].

19th June 1905.

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 Annie Paton Broadfoot 23 Bentinck St Greenock

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Archibald Broadfoot 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 John Archibald Broadfoot to the Royal 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) Annie Paton Broadfoot

(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 November 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, . . . John Archibald Broadfoot
2. Sex and Age, . . . Male 43
3. Married, Single, or Widowed, . . . Single
4. Condition of Life, and previous Occupation (if any), . . . Late Master Mariner
5. Religious Persuasion, so far as known, . . . Protestant
6. Previous Place of Abode, . . . 23 Bentinck St Greenock
7. Place where Found and Examined, . . . do
8. Length of time Insane, . . . Insane for about 10 years
9. Whether First Attack, . . . See above
10. Age (if known) on First Attack about 43
11. When and where previously under Examination and Treatment (5) . . . Never
12. Duration of Existing Attack, . . . Continuously worse
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, . . . ~~of Greenock~~
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 Paton Broadfoot 23 Bentinck St Greenock Sister So far as 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 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 Twenty fourth day of November One thousand nine hundred and Five

(To be signed by the party applying) Annie Paton Broadfoot

P. p.

T. & A. C.—Sept. 1906.

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 Whiteford being a (1) Doctor 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) ~~[illegible]~~ 23 Bentinck Street - Greenock in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) John Broadfoot - of no present occupation and that the said John Broadfoot is a (5) person of unsound 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 said to me that he is the Heir of Schoreh Fireh - that he will reign over that he is the Son of the President Grant of the United States that his brother & sister are not related to him - that he knows nothing of them - that this is the twenty first of April 1891 - and that he will go to Paradise tomorrow morning three?

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I am informed by his sister, that he refuses no food provided or anyone - that she has to clean food in a cleaner where he sees and takes it - that he turns on all the water taps in the house during the night - that she is afraid of his setting fire to the house

Name and Medical Designation, James Whiteford MB Edin

Place of Abode, 6 Forsyth Street Greenock

DATED this Twenty first day of November 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.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, James Harris Garcia Whiteford being a (1) Bachelor of Medicine & Master of Surgery 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) 23 Bentinck Street, Greenock. in the County of Renfrew separately from any other Medical Practitioner, visited and personally examined (4) John Broadfoot, of no present occupation and that the said John Broadfoot is a (5) person of unsound 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 his older brother was going to see him tonight, which has no older brother. He stated that his brother and sister who live with not related in any way to him. He also said that he was a prophet sent after ~~[illegible]~~

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His sister informed me that he will eat no food provided by her, he ~~[illegible]~~ over the floors, turns on all the water taps in the house. She also ~~[illegible]~~ he believes his brother to be the Great High Priest.

Name and Medical Designation, James Harris Garcia Whiteford MB CM (Edin) L.R.C.P.

Place of Abode, 8 Elderslie Street, Greenock

DATED this Twenty First day of November 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,
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 Annie P Broadfoot
Date 28th Nov 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Edward William Neish, Esquire, Sheriff Substitute of ~~the~~ (1) Renfrew and of Ayr
having had produced to me, with a Petition at the instance of (2) Annie Polson Broadfoot, 23 Bentinck Street, Greenock
Certificates under the hands of James Whiteford
and James Harris Carola Whiteford 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 Archibald Broadfoot and that the said John Archibald Broadfoot 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 Archibald Broadfoot as a Patient into the (6) Crichton Royal Asylum of 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 John Archibald Broadfoot 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 November One thousand nine hundred and five

To the Superintendent of the (1) Crichton Royal Institution
Asylum of Dumfries

(1) Public, District, Parochial, or Private.

[Signature] E.W. Neish

No. 9503.

John Archibald Broadfoot.

Adm: 28 November 1905.

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.

and Galloway and his Substitutes,—

ector of Poor for the Parish of Dumfries
d Statement and accompanying Medical
minn,

f Mental Derangement, and a proper
May it therefore please your Lord-
agnes McMinn,
ton Royal Institution at Dumfries, and
ution.

les McJones

(*) day of November,
years.

, the fact to be so stated.

McMinn.
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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
20. Special Circumstances (if any) preventing the insertion of any of the above particulars,

No.
Dumfries.
30th Novr. 1905.
Agnes Lauder McMinn-
mother residing at Bocklinks,
Ruthwell, Annan.
None.

I certify that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Thirtieth day of November, One thousand nine hundred and five years.

(*To be signed by the party applying*). Miles McJones

Copy.

I certify that Agnes McMunn residing at Clarencefield Rutherwell is now in good health, and of sound mind.

(Signed) William Scott. M.B.C.M.

Rutherwell 9th Dec. 1907

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 Mc Minn, 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 Mc Minn, 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 Thirtieth (*) day of November, One thousand nine hundred and five 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 Mc Minn.
2. Sex and age,	Female – 42.
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,	39 Brewery St.: Dfs.
7. Place where found and examined,	do. do. do.
8. Length of time Insane,	a few months.
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,	Nowhere.
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,	30th Novr. 1905.
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 Lauder Mc Minn – mother – residing at Locklie, Ruthwell, Annan.
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 Thirtieth day of November, One thousand nine hundred and five years.

(To be signed by the party applying) Miles Mc Innes

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, Peter Murray Ker M.B.
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) 39 Brewery Street, Dumfries in the County of Dumfries, separately from any other Medical practitioner, visited and personally examined (4) Agnes McMinn, spinster, pauper, 39 Brewery Street, Dumfries, and that the said Agnes McMinn, is a (5) person of unsound 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 maniacal; rushing about the house. Believes she has committed an unpardonable sin, & that she is lost. She can't sleep or eat.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name of Medical Designation, } Peter Murray Ker M.B.

Place of Abode, 25 Castle Street Dumfries

DATED this Thirtieth day of November, One thousand nine hundred and five 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 Young,
being a (1) Bachelor of Medicine & 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) 39 Brewery St. Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Agnes McMinn, Spinster, & Pauper, Of Lander, 39 Brewery St. — and that the said Agnes McMinn, is a (5) an 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)
Rushes about the house in a distracted condition — wringing her hands, moaning & declars that her inside is on fire. Attempted to throw herself down the stairs.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Is unable to rest — in a continuous state of distraction — declars she has no heart & could neither hang, poison, nor drown herself. Attempts to commit Suicide by throwing herself over windows & down stairs.

Name of Medical Designation. } James Young M.B.C.M.

Place of Abode, 47 Castle St, Dumfries

DATED this Thirtieth day of November, One thousand nine hundred and five.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises 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 Lee,
being (1) Resident Physician,
hereby certify, on Soul and Conscience, that I have this day, at (2) 39 Brewery Street Dumfries
in the County of Dumfries, seen and personally examined Agnes McMinn, 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.

(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 Thirtieth day of November, One thousand nine hundred and five years.

Peter Murray Lee MRCP

(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 Mc Minn,
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 Jimea 28 Queen St Dfs

Date, 30th Nov 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION & RECEPTION OF THE LUNATIC.

I, John Clerk Esquire, Honorary 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 Jimea Inspector of Poor Dumfries,
Certificates under the hands of Peter Murray Lee,
and James Young,
being two Medical Persons duly qualified in terms of an Act, entitled "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) Agnes Mc Minn, 39 Brewery Street, Dumfries. (a pauper)
and that the said Agnes Mc Minn is a (3) person of unsound mind, an insane person,
and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE YOU to receive the said Agnes Mc Minn, 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 Agnes Mc Minn, 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 First day of December, One thousand nine hundred and five years.

John Clerk

To the Superintendent of the Crichton Royal Institution for Lunatics, at Dumfries.

No. 9504.

Name, Agnes de Rein
(Mrs)

Date of Admission, 30 November 1905.

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 Charles Breckenridge Inspector of Poor of the Parish of Penninghame

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Starke with whom your

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner (3) has been called upon to deal 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 Starke to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(To be signed by the Party applying) C Breckenridge

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 1st (4) day of Decr 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,	James Starke
2. Sex and Age,	Male 70
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Retired Gardener
5. Religious Persuasion, so far as known,	Prot
6. Previous Place of Abode,	Kidderminster
7. Place where Found and Examined,	Carsbie Infant School Newton Stewart
8. Length of time Insane,	present attack dates back 5 months
9. Whether First Attack,	Second attack
10. Age (if known) on First Attack,	about 62
11. When and where previously under Examination and Treatment (2)	admitted to Provincial Asylum Worcestershire in 1897
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,	born in Minnigaff
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 Miss Jessie Helen Starke Carsbie Infant School Newton Stewart
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	one sister now dead was insane

(2) 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 12th day of December One thousand nine hundred and five

(To be signed by the party applying) C Breckenridge

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, James Gibbons Dickson being a (1) Doctor of Medicine, University of Glasgow 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) Corbie Infant School House, Newton Stewart in the County of Wigtown, separately from any other Medical Practitioner, visited and personally examined (4) James Starke, Corbie Infant School House, Newton Stewart and that the said James Stark is a (5) person of unsound 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)

Manner and behaviour strange and unusual. Muttering and rambling speech. Under the influence of delusion. Hears people talking to him through and preventing him from sleeping.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Miss Starke - Sister

Sleeplessness. Given to wandering and staying out of doors at night. Twice gone through window - the second time falling and severely injuring himself.

Name and Medical Designation, James G. Dickson, M.D.

Place of Abode, Woodlea, Newton Stewart

DATED this first day of December 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, Norman James McKie being a (1) Doctor of Medicine of the University of Edinburgh 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) Corbie Infant School House, Newton Stewart in the County of Wigtown, separately from any other Medical Practitioner, visited and personally examined (4) James Starke, Corbie Infant School, Newton Stewart and that the said James Starke is a (5) person of unsound 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) Mutters to himself in intervals of our conversation. Has a fixed delusion that people speak to him at night, particularly one called "Martha", inciting him to get up and act. And that "Martha" lives in the public park.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Miss Starke his sister

Sleepless. Restless. Wanders about aimlessly. Suffers from various delusions.

Name and Medical Designation, Norman James McKie M.B.

Place of Abode, 14 Arthur Street Newton Stewart

DATED this first day of December 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,
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, Geyr Watson (1) Sheriff Substitute
~~of the (2)~~ of Dumfries & Galloway
having had produced to me, with a Petition at the instance of (3) Charles Breckenridge Inspector of Poor of the Parish of Penning
Certificates under the hands of James G. Dickson
and Norman James McKie 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 Starke, retired Gardener and that the said James Starke 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 Starke as a Patient into the (6) Public 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 James Starke 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 Newton Stewart] this first day of December One thousand nine hundred and five years

To the Superintendent of the (7) Public Asylum of Dumfries

(7) Public, District, Parochial, or Private.

[Signature] Geyr Watson

No. 9505.

James Starke.

Adm: 2 December 1905.

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 ~~Dumfries shire~~ and Galloway, — and his Substitutes, ~~Dumfries~~.

The Petition of John Lyons, Inspector of Poor, for the Parish of Annan,

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet May Brown Beck Halliday or Beattie, 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 Janet May Brown Beck Halliday or Beattie 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 Lyons

(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 December, — 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,	Janet May Brown Beck Halliday or Beattie.
2. Sex and Age,	Sex Female age 30 years.
3. Married, Single, or Widowed,	married.
4. Condition of Life, and previous Occupation (if any),	formerly domestic Servant.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Northfield Cottage, Annan. do. do.
7. Place where Found and Examined,	
8. Length of time Insane,	about one week.
9. Whether First Attack,	no.
10. Age (if known) on First Attack,	26 years.
11. When and where previously under Examination and Treatment (3)	about 4 yrs ago. by Dr Murdoch Annan.
12. Duration of Existing Attack,	about one week.
13. Supposed Cause,	Child-birth.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	very 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,	Robert Beattie. Coachman. Northfield Cottage, Annan. husband. Grandmother was insane.
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 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 third — day of December, — One thousand nine hundred and five. —

(To be signed by the party applying) John Lyons

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Wm Elder,
being a (1) mrs cons. Glasgow Univers
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) Northfield Cottage, mar annan, in the County of Dumfries, separately from any other Medical Practitioner visited and personally examined (4) Janet Mary Brown Beck Halliday or Beattie, Northfield Cottage, mar Annan, a pauper, and the said Janet M.B.B. Halliday or 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)
vacant look, irrelevancy of statements, She state there are people & things around her but cannot that there annoy her.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her mother, Mrs Richardson, states she cries out that policemen are around her.

Name and Medical Designation, Wm Elder
Place of Abode, St John's Villa Annan
Dated this third day of December, One thousand nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert 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, 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) Northfield Cottage, near Annan, in the County of Dumfries, separately from any other Medical Practitioner visited and personally examined (4) Janet Mary Brown Beck Halliday or Beattie, Northfield Cottage near Annan, a pauper, and the said Janet Mary Brown Beck Halliday or 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) She is alternately depressed & excited in an emotional way - is incoherent in speech; quite irrational in behaviour & get excited when talking, without cause.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her aunt - Mrs. Richmond - tells me she is subject to attacks of violent excitement - weeping & screaming & tears & is quite unmanageable at such times.

Name and Medical Designation, Wm Murdoch M.D.
Place of Abode, Trinity Park Annan.
Dated this third day of December, One thousand nine hundred and five.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street, and number of the house (if any), or other like particulars.*
(4) *Insert 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, Wm Elder,
being (1) Medical Surgeon,
hereby certify, on soul and conscience, that I have this day, at (2) Nottfield Cottage Kirkmahoe,
in the County of Dumfries, seen and personally examined Janet Mary Brown Beck Halliday or Beattie, 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).

(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.

Wm Elder

DATED this third day of December, —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 Asylum to receive therein Janet Mary Brown Beck Halliday or Beattie to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Inspector of Poor, Annan.

Signature and Address Wm Elder Annan

Date 3rd December 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I George Lampson (1) Esquire, Advocate, Sheriff-Substitute of Dumfries & Galloway, at Dumfries, having had produced to me with a Petition at the instance of (2) John Lance, Inspector of Poor, Annan, Certificates under the hands of William Elder 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 (3) Janet Mary Brown Beck Halliday or Beattie Nottfield Cottage Annan (a pauper) and that the said Janet Mary Brown Beck Halliday or Beattie, is a (4) lunatic and unsound mind,
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Mary Brown Beck Halliday or Beattie as a Patient into the (5) Public Asylum of Crichton Royal Institution, Dfs, 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 Mary Brown Beck Halliday or Beattie 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 December, One thousand nine hundred and five years.

To the Superintendent of the (5) Public Asylum of Crichton Royal Institution Dumfries.

(5) Public, District, Parochial, or Private.

[Signature] Geo. Lampson

No. 9506.

Janet Mary Brown Beck
Halliday or Beattie.
(Annan)

Adm: 3 December 1905.

18,045.

[FORM B.]

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.

D OF LUNACY
30 NOV 1905

I, [the undersigned] George Rae being desirous to transfer James Cook at present a Patient in Midlothian Asylum and (1) a Pauper Lunatic of the Parish of which I am Inspector from the said Asylum to the Dumfries 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,	James Cook
2. Sex and Age,	Male. 27 Years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and Previous Occupation (if any),	Joiner
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	Wamphray
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 Cook 39. Bede Burn Road Jarrow on Tyne

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 Rae

(2) Inspector of Poor Wamphray

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED this twenty-fifth day of November One thousand nine hundred and five 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.

Please return this to Inspector of Correspondence.

T. & A. C.—May 1898.

MEDICAL CERTIFICATE.

(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.

I, the undersigned Richard Blackwell Mitchell hereby certify that I have this day at (1) Midlothian Asylum personally examined James Cook who has been a Patient in said Asylum since (2) 24th September 1905 and I certify that 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 the Patient, that (4) he is excited, and labour under a morbid degree of Exaltation, and that he presents features indicating organic brain disease. and with respect to the Bodily State of the Patient, that (5) they are weak. He has marked tremulous movements of lips during speech irregularity in margin of pupils, and other signs of organic brain disease, 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 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) R. B. Mitchell

(Medical Qualification) M.D.

(Date) 23d November 1905.

No 9507
James Cook
(Mankeep)
Adm: 6 December 1905

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 James Cook from Midlothian & Peebles 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. Spence
~~Commissioner.~~ Secretary

DATED at Edinburgh, this 30th day of November, One thousand ~~eight~~ nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

26th September 1905.

JWS

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 David Thorburn Inspector of Poor Parish of Kirkpatrick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Boyle 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 Jane Boyle 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) David Thorburn.

(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 December 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,	Jane Boyle
2. Sex and Age,	Female. 65
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	
7. Place where Found and Examined,	Kirkcudbright Combination Poorhouse
8. Length of time Insane,	
9. Whether First Attack,	not known
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment (5),	
12. Duration of Existing Attack,	not known
13. Supposed Cause,	
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,	Kerrick. 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,	None in this County
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Left this County when a child taken to England

(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 fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fifth day of December One thousand nine hundred and five

(To be signed by the party applying) David Thorburn.

T. & A. C.—May 1905.

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 Lilico being a (1) M.B., C.M. 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) Kirkcudbright Combination Workhouse in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Jane Boyle - pauper and that the said Jane Boyle is a (5) person of unsound 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 a rambling story of being disturbed at night by some man who pushes the furniture about - that was on the door - here there is no reason for this statement. also she is confused in her answers to questions & the answers are sometimes irrelevant

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Ellen Reid - another inmate - tells me that she got up at night & disturbs the other inmates, that on the 2nd night of the 1st Dec she went to the window & tried to get out

Name and Medical Designation, Wm Lilico M.B., C.M.
Gp. Medical Officer
Place of Abode, Kirkcudbright

DATED this fifth day of December 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.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, Wm Swanston Spence Reid being a (1) Gpa. M.B. C.M. 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) Kirkcudbright Combination Poorhouse in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Jane Boyle, Pauper and that the said Jane Boyle is a (5) person of unsound 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 rambles in her conversation & is sometimes incoherent - She imagines things, which certainly do not exist.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Wanders about at night pulling the bed clothes off the other inmates - Saying that there is a man in the room to

Told me by Ellen Reid & Mrs.

Name and Medical Designation, W.S. Reid M.B.
Gp. Medical Officer
Place of Abode, Oakley Kirkcudbright

DATED this 5th day of December 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,
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.

(2) 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, Elliot Francis Muse, Sheriff Substitute of
~~of the~~ (1) Dumfries and Galloway
having had produced to me, with a Petition at the instance of (2) Davies Horburn
Certificates under the hands of W. & S. Reid
and William Lilico 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 ~~Bamp~~ Boyle, Pauper
and that the said Jane Boyle 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 Boyle as a patient into the Southern Counties Asylum of Dumfries and I authorize (6) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Boyle which accompanied the said Petition.

DATED [at Kirkinbright] this Fifth day of December One thousand nine hundred and five

To the Superintendent of the (7)
Southern Counties *Asylum of* Dumfries

[Signature] Elliot F. Muse

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(2) 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.
(6) His, or her.
(7) Public, District, Parochial, or Private.

No. 9508.

Jane Boyle.

(Penrick)

Adm: 6 December 1905.

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 Dumfriesshire and Galloway — *and his Substitutes,*—

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 Margaret Carlyle or Warwick,

(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 Margaret Carlyle or Warwick, — to the Crichton Royal Institution, and to sanction her admission into the said Asylum.

(*To be signed by the Party applying*) John Laurie

(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 December, — 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,	Margaret Carlyle or Warwick.
2. Sex and Age,	Sex Female. Age 49 years.
3. Married, Single, or Widowed,	Widowed.
4. Condition of Life, and previous Occupation (if any),	Housewife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Bydekirk Village.
7. Place where Found and Examined,	Do. Do.
8. Length of time Insane,	about 2 months.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	40 years.
11. When and where previously under Examination and Treatment (5)	Crichton Royal Institution 1897.
12. Duration of Existing Attack,	about 2 months.
13. Supposed Cause,	unknown.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	doubtful
16. Whether Dangerous to others,	Do
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,	James Warwick farm Steward Hurkledale Cummertrees Dor.
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 or approximate thereto. If not previously under Examination or Treatment, write that fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Sixth day of December, One thousand nine hundred and five.

(*To be signed by the party applying*) John Laurie

T. & A. C.—August 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, William Lockerbie
being a (1) Bachelor of Medicine & Bachelor of Surgery University 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) Boyde's Village, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Margaret Carlyle or Warwick Pauper, and that the said Margaret Carlyle or Warwick, is a (5) person of unsound 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 the delusion that she is "rotten with Syphilis": that her bowels are also rotten & will not hold. Has threatened to stick a knife into her belly. Is very dirty: & says that she cannot live.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Jamieson states that she has threatened herself harm many times.

Name and Medical Designation, W. Lockerbie Surgeon

Place of Abode, Annan

DATED this 27th day of December, One thousand nine hundred and five. Wx.

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, William Elder,
being a (1) M.B. C.M. 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) Boyde's Village, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Margaret Carlyle or Warwick, Pauper, and that the said Margaret Carlyle or Warwick, is a (5) person of unsound 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 for month has her tongue attached. That her bowels are rotting.

(7) *State the information and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By Mrs Jamieson (a neighbour) That she asserts continually she is dying & hopeless if.

Name and Medical Designation, Wm Elder M.B.

Place of Abode, St John's Villa Annan

DATED this 28th day of December, 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, William Lockerbie, ~~M.B. C.M. Edin.~~ being (1) M.B. C.M. Edin. hereby certify, on soul and conscience, that I have this day, at (2) Brydekirk in the County of Dumfries, seen and personally examined Margaret ~~Warwick~~ Carlyle or Warwick, 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.

W. Lockerbie

DATED this Sixth day of December, 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 Asylum to receive therein Margaret Carlyle or Warwick 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 Laurd. Annan.

Date 6th Dec 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion Sh. Substitute, of ~~the~~ (1) the Dumfries and 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 William Lockerbie, and William Elder, 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 Carlyle or Warwick, Brydekirk, Dumfries, Married, and that the said Margaret Carlyle or Warwick, 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 Carlyle or Warwick 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 Margaret Carlyle or Warwick, 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 Seventh day of December, One thousand nine hundred and five years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution, Dumfries.

(7) Public, District, Parochial, or Private.

[Signature] Geo: Campion

No. 9509.

Margaret Carlyle or
Warwick
(Annan)
Adm: 6 December 1905.

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 Maggie Hope. 3 Tankerville Terrace, Newcastle-on-Tyne.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Pool, 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 Jane Pool, 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*) Maggie Hope

(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 December, One thousand nine hundred and five 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 Pool.
2. Sex and Age,	Female. 80.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Lady.
5. Religious Persuasion, so far as known,	Free Church of Scotland.
6. Previous Place of Abode,	Darroo-on-Tyne. Newcastle, & Dumfries.
7. Place where Found and Examined,	
8. Length of time Insane,	30 years.
9. Whether First Attack,	Yes.
10. Age (if known) on First Attack,	50 years.
11. When and where previously under Examination and Treatment (5)	No.
12. Duration of Existing Attack,	30 years.
13. Supposed Cause,	Sudden 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,	—
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 Maggie Hope. Neice — 3 Tankerville Terrace. Newcastle on Tyne. —
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 previously under Examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eleventh day of December, One thousand nine hundred and five.

(*To be signed by the party applying*) Maggie Hope

T. & A. C.—May 1905.

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 William Lucelaus Hope, being a (1) Bachelor of Medicine & Surgery Durham, and being in actual practice as a (2) Physician, do hereby certify, on soul and conscience, that I have this day, at (3) Central Station, Newcastle on Tyne, in the County of Northumberland, separately from any other Medical Practitioner visited and personally examined (4) Miss Jane Pool, and that the said Miss Jane Pool, 21 Queen St Lochmaben is a (5) person of unsound 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 old, rather feeble, and suspicious of people about her. Intiques pictures with blasphemous writings appears to be living to a certain extent in her childhood

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Is always accusing the persons whom she lives with of stealing things from her. Complains that work done for her is a sort of trick of wicked people. She says "The Lord" comes to her in the evening, & talks with her, tells her what to do.

Name and Medical Designation, Charles William Lucelaus Hope M.B.

Place of Abode, 3 Jamieville Terrace, Newcastle on Tyne

DATED this 9th day of November One thousand nine hundred and five. December. C.W.L.H.

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 Maxwell Ross, being a (1) Fellow of the Royal College of Surgeons of Edinburgh, and being in actual practice as a (2) Medical Officer of Health, 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) Miss Jane Pool, and that the said Miss Jane Pool, is a (5) person of unsound 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, incoherent in answers to questions, and does not keep herself in control — is suspicious of persons whom she meets, is suffering, in short, from senile dementia

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, J Maxwell Ross M.B., F.R.C.S.Ed.

Place of Abode, Crichton, Dumfries

DATED this twelfth day of December, 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, James Rutherford,
being (1) a Fellow of the Royal College of Physicians of Edin.
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries,
in the County of Dumfries, seen and personally examined
Miss Jane Pool, 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

DATED this ~~Ninth~~ 11th day of December, — 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 Asylum to receive therein Jane Pool, to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Sister

Signature and Address Maggie Hope - 3 Sankeyfield Ter. Newcastle-upon-Tyne.

Date 12th December 1905.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, George Campion (4) Sheriff Substitute, of the County of Dumfries and Galloway, at Dumfries, having had produced to me, with a Petition at the instance of (5) Miss Maggie Hope, 3 Sankeyfield Terrace, Newcastle-on-Tyne, Certificates under the hands of Charles William Menelaus Hope, and James Manuel Ross, 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) Miss Jane Pool, Jarrow-on-Tyne. (Patient's Aunt) and that the said Miss Jane Pool, 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 Miss Jane Pool, as a patient into the (8) Public Asylum of Crichton Royal Institution and I authorize (9) her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Miss Jane Pool 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.
(9) His, or her.

DATED [at Dumfries] this Thirteenth day of December, One thousand nine hundred and five years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution, Dumfries.

[Signature] Geo: Campion

(8) Public, District, Parochial, or Private.

No. 9510.

Lane Pool.

Admr. 11 December 1905.

18,054. [FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

BOARD OF LUNACY
FEB 8 AUG 1905

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned (1) A. W. Craig being desirous to transfer Mary Harning at present a Patient in Woodbourne Asylum Lenzie and (2) a pauper lunatic of the Parish of Shin Down Inspector of Poor 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) 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."

STATEMENT OF PARTICULARS.

1. Christian Name and Surname of Patient at length,	Mary Harning
2. Sex and Age,	Female, 20 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. Parish to which the Lunatic (if a Pauper) is Chargeable,	Oldhurce
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,	Father, Robert Harning Shepherd. Blaughraid, Creetown, no.

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*) A. W. Craig

(3) Inspector of Poor of the Parish of Oldhurce

(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 eighth day of December One thousand nine hundred and five

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 Hamilton P. Marr

(1) Name Asylum. hereby certify that I have this day at (1) Woodilee Asylum, Lenz personally examined Mary Haining who has be Patient in said Asylum since (2) 3rd July 1905. and I certify at

(2) Insert Date of Admission.

(3) Insert "is," or "is not," as the case may be. the said Patient is a person of unsound mind, (3) not epileptic, (3) is suici (3) is dangerous to others. I also certify, with respect to the Mental Stat

(4) Describe Mental State. the Patient, that (4) she is the subject of morbid impulse which take a suicidal trend. She is hysterical and morose, depressive. She attempts untruths and is always alone this and gives picture. She is recommended for safe observation.

(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 remo to the (1) Crichton Royal 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 :—

(6) Insert "the following are," or "there are no," as the case may be.

She has left to obtain nursing at her residence near Prestwick and one at Ayr. She also attempted to commit suicide on 3rd July 19 by drinking a lotion containing aco

(Signature) Hamilton P. Marr

(Medical Qualification) M. B. F. F. P. S. Gla

(Date) 1st December 1905

No. 9511.
Mary Haining.
(Cold Lucy)
Adm: 14 December 1905.

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 trans of Mary Haining (Haning)
from Glasgow District Asylum, Woodilee
to Crichton Royal Institution, Dumfries
and the Board having considered such Application and the accompanying Medi Certificate, do hereby authorize the transfer, at any time within fourteen days from t date hereof, of the said patient as requested.

J. W. Pearce Secretary.

DATED at Edinburgh, this 9th day of December, 0 thousand nine hundred and five.

Date of Sheriff's Order [*to be inserted at the Office of Board*].

5th July, 1905.

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 Robert Armour

5 Sandringham Drive New Brighton Cheshire

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Armour

(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 Thomas Armour to the Cheddon Royal Institution — and to sanction his admission into the said Asylum.

(To be signed by the Party applying) R Armour

(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 December One thousand nine hundred and five 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 Armour
2. Sex and Age,	male 39
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Cotton broker
5. Religious Persuasion, so far as known,	protestant
6. Previous Place of Abode,	5 Sandringham Drive New Brighton
7. Place where Found and Examined,	Johnstone Bridge Lockerbie
8. Length of time Insane,	about 5 weeks
9. Whether First Attack,	first attack
10. Age (if known) on First Attack,	39
11. When and where previously under Examination and Treatment (5)	
12. Duration of Existing Attack,	abot 5 weks
13. Supposed Cause,	mental worry
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,	R Armour brother 5 Sandringham Drive to New Brighton Cheshire
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 Examination or treatment state fact.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eighteenth day of December One thousand nine hundred and five years.

(To be signed by the party applying) R Armour

T. & A. C.—Dec. 1902.

Pro.

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) Beechfield Johnstone Bridge in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Armour and that the said Thomas Armour is a (5) person of Unsound 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 dull and depressed, cant consentrate his attention on anything, is delusional, thinks that this is Hell and his whole conduct and behaviour are irrational

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother, Robert Armour, informs me that his brother Thomas has no refreshing sleep and requires constant watching lest he injure himself

Name and Medical Designation, George Irving M.B.

Place of Abode, Lockerbie

DATED this Seventeenth day of December 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.

(6) *State the facts.*

(7) *State the information and from whom derived.*

I, the undersigned, William Park being a (1) Doctor of Medicine & Master of 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) Beechfield Johnstone Bridge in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Armour and that the said Thomas Armour is a (5) person of unsound 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) Wild staring countenance excited manner & at times fits of depression. He is deluded by the idea that life & him just now is actual & can never lift his mind from this idea, if he talks of any thing he imagines he is discussing those to whom he talks.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother Robert Armour says that Thomas before he was ill never got better & always thinks of the one subject of his present state.

Name and Medical Designation, William Park M.D.

Place of Abode, Johnstone Bridge Lockerbie N.B.

DATED this Eighteenth day of December 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, William Park
being (1) Doctor of Medicine & master of Surgery
hereby certify, on soul and conscience, that I have this day, at (2) Beechfield
in the County of Dumfries, seen and personally examined
Thos Armour, 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 Park M.D.

DATED this Eighteenth day of December 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 Thomas Armour
to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Brother

Signature and Address R. Armour

Date 18th December 1905

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Aleck — (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) Robert Armour, 5 Sandringham Drive, Newbrighton, Cheshire, Certificates under the hands of George Fleming, and William Parker, 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 Armour, Beechfield, Johnstone Bridge, Lockerbie (Pet.r's Brother) and that the said Thomas Armour — 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 Armour, 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 Armour, 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 December, One thousand nine hundred and five years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution

(7) Public, District, Parochial, or Private.

[Signature] Dumfries. Sheriff Clerk

No. 9512

Thomas Armour.

Adm: 18 December 1905

18061.

[FORM B²]

BOARD OF LUNACY
REC^D 13 DEC. 1905

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 (1) David Greig
being desirous to transfer Miss May Forbes Greig
a present a Patient in Midlothian asylum and (2) detained at my instance,
from the said Asylum to the Crichton Royal Institution.

(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."

ng to submit the subjoined Statement of Particulars regarding the said patient, and a edical 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,	May Forbes Greig
2. Sex and Age,	Female, 54½ Years
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and Previous Occupation (if any),	Teacher
5. Religious Persuasion, so far as known,	Protestant
6. Parish to which the Lunatic (if a Pauper) is Chargeable,	Not a Pauper
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,	D. Greig, (Brother) 1. Oswald Terrace, Corstorphine. No.

I certify that, to the best of my knowledge, the above particulars are correctly stated, nd I hereby make Application for the authority of the General Board of Commissioners in unacy to the transfer of the patient as aforesaid.

(*Signature of Applicant*) D Greig

(3) Brother

(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 12th day of December One thousand nine hundred and five

N.B.—The foregoing particulars, and those contained in the Medical Certificate which ollows, are required for the information of the Board and of the authorities of the Asylum o which the Patient is to be transferred.

T. & A. C.—Feby. 1903.

MEDICAL CERTIFICATE.

(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.

I, the undersigned Richard Blackwell Mitchell hereby certify that I have this day at (1) Midlothian Asylum personally examined Miss May Forbes Greig who has been Patient in said Asylum since (2) 7th May 1904 and I certify that 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 the Patient, that (4) she labours under auditory hallucinations, e.g. continually hears in imagination the voice of a "Mr. Forsyth," who she imagines is in love with her. and with respect to the Bodily State of the Patient, that (5) she is 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

(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 :—

(Signature) R. B. Mitchell

(Medical Qualification) M.D.

(Date) 12th December 1905.

No. 9513
May Forbes Greig.
Adm: 9th December 1905

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 May Forbes Greig from Midlothian 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. A. Hence
Secretary.

DATED at Edinburgh, this 18th day of December One thousand nine hundred and five.

Date of Sheriff's Order *[to be inserted at the Office of Board].*

6th May 1904.

Jud.

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 William Obenauf, 8 St. James' Road, Carlisle

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Obenauf — 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 Jane Obenauf — 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) Wm Obenauf

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty eighth (3) day of December 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,	Jane Obenauf.
2. Sex and Age,	Female 53
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	School Teacher
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	110. Botchergate Rowan Carlisle
7. Place where Found and Examined,	8 St. James' Road Fairfield 110 Botchergate Rowan Carlisle
8. Length of time Insane,	This 8th days
9. Whether First Attack,	Second attack
10. Age (if known) on First Attack,	47.
11. When and where previously under Examination and Treatment (3)	Crichton Royal Institution
12. Duration of Existing Attack,	Three 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,	William Obenauf Husband 110. Botchergate Road Carlisle 8 St. James Road Carlisle
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 approbation 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 26th day of December One thousand nine hundred and five.

(To be signed by the party applying) Wm Obenauf

P. p.

T. & A. C. May 1905.

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, Alan Ambrose Eddard 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) 8 St James Road Carlisle in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Jane Obenauf and that the said Jane Obenauf 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)

Untidy & careless appearance, Constant talking of mechanical sentences Wild look & excitement.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Sleeplessness. Noisy - Shouting & objectionable change in conduct

Name and Medical Designation, A Eddard

Place of Abode. Carlisle

DATED this twenty third day of December 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, James Maxwell Ross being a (1) Fellow of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) 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) Jane Obenauf and that the said Jane Obenauf is a (5) person of unsounds 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 incoherently, rambling from one subject to another, says she feels electricity passing from my hands, that she is electric herself; she also behaves in an excited way, throws her arms about and laughs in an unnecessary fashion

(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 Maxwell Ross, F.R.C.S.Ed.

Place of Abode. Dumfries

DATED this twenty fifth day of December — 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, Henry Ambrose Lediard
being (1) Doctor of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) 8 St James' Road Carlisle
in the County of Cumberland, seen and personally examined
Jane Obenauf, 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 twenty third day of December 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 Jane Obenauf to whom the foregoing Certificate of Emergency refers.

Relationship or other capacity in which Applicant stands to Patient, Husband

Signature and Address Wm Obenauf

Date 26th December 1905.

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) William Obenauf 8 St James' Road Carlisle, Certificates under the hands of Henry Ambrose Lediard, and James Macnell Rose 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 Obenauf 8 St James Road, Carlisle (Peter's Wife) — and that the said Jane Obenauf 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 Jane Obenauf as a patient into the (6) Public Asylum of Crichton Royal Institution and I authorize (7) Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Obenauf, 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.
(7) His, or her.

Dated [at Dumfries] this twenty-sixth day of December, One thousand nine hundred and five years.

To the Superintendent of the (8) Public *Asylum of* Crichton Royal Institution Dumfries.

(8) Public, District, Parochial, or Private.

[Signature] John Clerk

No. 9514.

Jane Abenauf.

Adm: 23 December 1905.

