Washington E. Gould

Supervisor of Independence Oakland County.

651

DEAR SIR:—The person named on the following blank was reported from your township in 1886 in the statistical information relative to the Insane, Epileptic, Idiotic, Deaf and Dumb, and Blind, but not reported in the returns for the present year. Have the kindness to inform me why said person was not reported this year; that is, if he has recovered, died, or removed from the township since the returns were made for 1886, or was he accidentally overlooked this year? If the latter, please complete and return the statistics of said person at the earliest moment possible.

If the person has removed from your township inform me, if you can, where he has removed to; that is, to what county and township, or what city and ward.

Very respectfully,

GILBERT R. OSMUN, Secretary of State.

State of Michigan, Department of State.

Lansing, September 15, 1887.

No.	FULL NAME OF PERSON.	NAME AND DEGREE OF THE MALADY.†	CAUSE OF THE MALADY.	MALE OR FEMALE.	WHITE, BLACK, MULATTO, INDIAN, ETC.	SINGLE, MARRIED, WIDOW, WIDOWER, OR DIVORCED.	MENTAL CONDITION OF PERSON.‡	GENERAL HEALTH.	HABITS.†	PECUNIARY ABILITY OF PERSON.	PECUNIARY ABILITY OF RELATIVES LIABLE FOR THE SUPPORT OF SUCH PERSON.*	AGE IN YEARS.	TIME INSANE IN YEARS AND FRACTIONS.	TIME UNDER MEDICAL TREATMENT IN YEARS AND FRACTIONS.†	NAME OF PERSON, COUNTY, TOWNSHIP, ETC., AS WHOSE EXPENSE SUPPORTED.	TIME IN YEARS AND FRACTIONS, AN INMATE OF A PUBLIC INSTITUTION.†	OCCUPATION.†	BIRTHPLACE OF PERSON.†	BIRTHPLACE OF PARENTS.†
1	John Roe	Indian								Value of Estate, $ Value of Income, $	Value of Estate, $ Value of Income, $								Father. Mother.
2										Value of Estate, $ Value of Income, $	Value of Estate, $ Value of Income, $								Father. Mother.
3										Value of Estate, $ Value of Income, $	Value of Estate, $ Value of Income, $								Father. Mother.
4										Value of Estate, $ Value of Income, $	Value of Estate, $ Value of Income, $								Father. Mother.
5										Value of Estate, $ Value of Income, $	Value of Estate, $ Value of Income, $								Father. Mother.

† "Insane," "Epileptic," "Idiotic," "Deaf and Dumb," "Blind," etc.

‡ "Intelligent," "Dull," etc. In the case of Blind persons, state mental condition previous to becoming afflicted. If a Child write the word "Child."

* If nothing, write "None." If a minor under guardianship, state the amount of property under control of guardian. Same provision in becoming afflicted. If a person under medical treatment, state the amount expended.

† If person is or has been an inmate of a public institution, so state. By "Public Institutions" is meant an institution for the treatment of the Insane, Deaf and Dumb, and Blind.

‡ In the case of Insane and Epileptic persons, state occupation previous to becoming afflicted. In the case of Blind persons, state occupation previous to becoming blind; if married or single at the present time. If a child, state occupation of parents. If a minor under guardianship, state the occupation of guardian. If a minor who has charge of his household, state the occupation. If a minor, neither guardian nor having charge of household, state the occupation of father, if living; if dead, of mother, if living; if dead, of person under whose years of age, write "Father's

§ Under what form of treatment.

¶ If married or the head of a family, state the number of persons in family.