

" EXHIBIT 1 "

I, Harold M. Rees M.D. hereby certify that I am a medical doctor practicing in the State of Maryland, and have so practiced for the last five years, that I attended and examined Grace Trail Babcock, a patient at Springfield State Hospital, Sykesville, Maryland, on the 18 day of July, 1944.

I hereby certify that the said Grace Trail Babcock is in my opinion, incompetent, by reason of her mental disability, to manage her property and estate and that the cause of the said incompetency is a serious mental disorder and the nature of said incompetency is Delirium Paranoid Type, and the extent of said incompetency is Complete, and the probable duration of the said incompetency is Life.

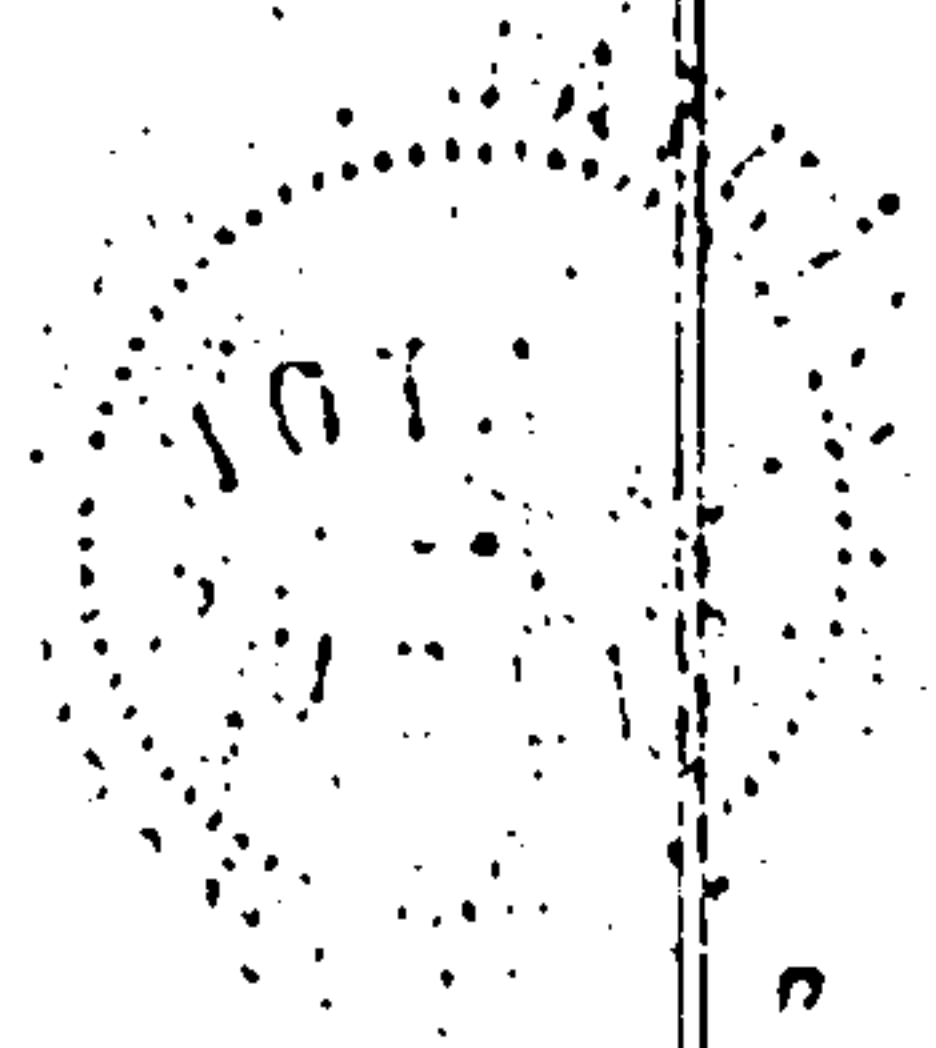
I further certify that I have examined the said Grace Trail Babcock within ten (10) days from the date hereof.

Harold M. Rees M.D.
Name

Sykesville Maryland
Address

Subscribed and sworn to before me the 19th day of July, 1944.

W. B. Nathan
Notary Public
MY COMMISSION EXPIRES
MAY 7, 1945



Filed July 21, 1944