

2. FOR CASES OF MANIA-A-POTU.

MEDICAL CERTIFICATE.

_____ 186 .

I hereby certify, that _____ is insane with mania-a-potu, and ought to be placed in a hospital for the insane.

_____ *Physician.*. *Physician's P. O. Address* _____

OBLIGATION.

In consideration of _____ being admitted a patient into the Maryland Hospital, at Baltimore, at my request, I promise to pay to the President and Visitors thereof, at said Hospital, in bankable funds, weekly in advance, the sum of _____ dollars a week for medical attendance and for board, until said patient is removed by me from said Hospital, and I promise also to pay for or to provide all requisite clothing and other things deemed proper for the health or comfort of the said patient—to receive or to remove him when discharged, and to pay for funeral expenses in the event of death.

Witness my hand this _____ day of _____ 186 , at _____

I request that the said _____ shall be admitted into the Maryland Hospital; and in consideration of his being so admitted, I hereby guarantee the performance of the above obligation.

_____ *Surety.*

To be signed by a citizen of Baltimore.

Baltimore, _____