

of the Board, and he is, during the session of the Legislature, subject to the orders of the Finance Committee of the Senate and the Ways and Means Committee of the House of Delegates.

By the Act of 1933, Chapter 222, the position of Executive Secretary to the Board was created, but this has not as yet been filled. By this Act, the Board was also charged with the duty of administering relief necessitated by involuntary unemployment or other emergency, and for this purpose a committee of the Board has been appointed consisting of the following:

Richard F. Cleveland, Chairman.  
 William L. Galvin.  
 Sidney Hollander.

Mr. Harry Greenstein, Director of the Associated Jewish Charities, is acting as Emergency Relief Administrator, his services having been donated by his organization.

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## MARYLAND TUBERCULOSIS SANATORIUM COMMISSION

### Institution at State Sanatorium, Frederick County

#### Ex-Officio Members:

Governor Albert C. Ritchie.....	Annapolis
Comptroller Wm. S. Gordy, Jr.....	Salisbury
Treasurer John M. Dennis.....	Riderwood

#### Appointed Members:

	Term Expires.
Charles H. Knapp, Pres..... Baltimore .....	1937
Dr. H. Warren Buckler, V. P. .... Baltimore .....	1935
Col. Geo. W. Rife, Sec.-Treas. .... Baltimore .....	1937
Dr. J. Hall Pleasants..... Baltimore .....	1939
Jos. J. Hoek..... Baltimore .....	1939
Robert A. Sindall..... Baltimore .....	1935
Dr. Charles H. Conley..... Frederick .....	1937
Superintendent and General Superintendent of Tubercular Sanatoria, Dr. Victor F. Cullen.	

The Members of this board are appointed for the term of six years. The terms of two expire every legislative year. The Governor, the Comptroller and the Treasurer are ex-officio members of the Board.

The State Sanatorium cares for 465 patients, and Mount Wilson cares for 160 patients. The population of the Eastern Shore Branch is 50 patients. Henryton cares for about 150 patients, all colored.

The State's program for the hospitalization of tubercular patients has been practically completed, and is expected to meet the demands of at least a number of years. The facilities are among the finest in the country, and are recognized everywhere as combining economy in operation and excellence in treatment.

The death rate from tuberculosis has decreased from 165.8 per 100,000 population in 1919 to 90.2 in 1930. Among white people the death rate was reduced from 150.8 in 1917 to 65. The colored death rate was reduced from 413.6 to 245.3 and now over one-half of the deaths from tuberculosis are among colored people which represents only one sixth of our population.