

No. 12 277.

Name

Charles Tomlinson.

Sex male

726

Previously in the Institution

| Particulars.                                                                                                                                         | State of Health on Admission. | Condition on Admission.         | Where Stationed. | Date. | Half-Yearly Report. |            |              |                               |                    |                  |                           |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------|------------------|-------|---------------------|------------|--------------|-------------------------------|--------------------|------------------|---------------------------|--|
|                                                                                                                                                      |                               |                                 |                  |       | Date.               | Favorable. | Unfavorable. | No. of Days absent from Work. | School Attendance. | General Conduct. | Initials, Superintendent. |  |
| Date of Birth ... ..                                                                                                                                 | 24 <sup>th</sup> March 1879.  | Good                            |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Native Place ... ..                                                                                                                                  | London                        |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Religion ... ..                                                                                                                                      | C. E.                         |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Read or Write ... ..                                                                                                                                 | No.                           |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Date of Commitment ... ..                                                                                                                            | 15/9/80.                      |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Committing Bench ... ..                                                                                                                              | London                        |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Date of Admission ... ..                                                                                                                             | 15/9/80.                      | If Vaccinated or had Small-pox. |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Term ... ..                                                                                                                                          | 7 years.                      | Particular Marks.               |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Cause of Commitment ... ..                                                                                                                           | reflected                     |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Parents living ... ..                                                                                                                                | mother                        |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Father dead. mother, Mary Tomlinson, in a dangerous state from fever. The mother has been cohabiting with a man named Richard Shipps alias Aspinall. |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Previous History.                                                                                                                                    |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| If Licensed Out.                                                                                                                                     |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Date ... ..                                                                                                                                          |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| To whom ... ..                                                                                                                                       |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Trade ... ..                                                                                                                                         |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Address ... ..                                                                                                                                       |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| General Remarks.                                                                                                                                     |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Discharged.                                                                                                                                          |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| State of Health on Discharge.                                                                                                                        |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| State of Education on Discharge.                                                                                                                     |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Expiration of Term.                                                                                                                                  |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| 15 <sup>th</sup> September 1887.                                                                                                                     |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |

No. 12 279.

Name

Albert Chitty.

Sex male

Previously in the Institution

| Particulars.                     | State of Health on Admission. | Condition on Admission.         | Where Stationed. | Date. | Half-Yearly Report. |            |              |                               |                    |                  |                           |  |
|----------------------------------|-------------------------------|---------------------------------|------------------|-------|---------------------|------------|--------------|-------------------------------|--------------------|------------------|---------------------------|--|
|                                  |                               |                                 |                  |       | Date.               | Favorable. | Unfavorable. | No. of Days absent from Work. | School Attendance. | General Conduct. | Initials, Superintendent. |  |
| Date of Birth ... ..             | 5 <sup>th</sup> April 1880.   | Delicate                        |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Native Place ... ..              | London                        |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Religion ... ..                  | C. E.                         |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Read or Write ... ..             | No.                           |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Date of Commitment ... ..        | 15/9/80.                      |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Committing Bench ... ..          | London                        |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Date of Admission ... ..         | 16/9/80.                      | If Vaccinated or had Small-pox. |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Term ... ..                      | 14 years                      | Particular Marks.               |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Cause of Commitment ... ..       | reflected                     |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Parents living ... ..            |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Previous History.                |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| If Licensed Out.                 |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Date ... ..                      |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| To whom ... ..                   |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Trade ... ..                     |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Address ... ..                   |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| General Remarks.                 |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Discharged.                      |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| State of Health on Discharge.    |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| State of Education on Discharge. |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| Expiration of Term.              |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |
| 16 <sup>th</sup> September 1894. |                               |                                 |                  |       |                     |            |              |                               |                    |                  |                           |  |

727

No. 12,281.

Name

Nicholas White

Ser Male

Previously in the Institution

| Particulars.                     | State of Health on Admission. | Condition on Admission. | Where Stationed. | Date. | Half-Yearly Report |            |              |                               |                    |                  |                           |
|----------------------------------|-------------------------------|-------------------------|------------------|-------|--------------------|------------|--------------|-------------------------------|--------------------|------------------|---------------------------|
|                                  |                               |                         |                  |       | Date.              | Favorable. | Unfavorable. | No. of Days absent from Work. | School Attendance. | General Conduct. | Initials, Superintendent. |
| Date of Birth ... ..             |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Native Place ... ..              |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Religion ... ..                  |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Read or Write ... ..             |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Date of Commitment ... ..        |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Committing Bench ... ..          |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Date of Admission ... ..         |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Term ... ..                      |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Cause of Commitment ... ..       |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Parents living ... ..            |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Previous History.                |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| If Licensed Out.                 |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Date ... ..                      |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| To whom ... ..                   |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Trade ... ..                     |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Address ... ..                   |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| General Remarks.                 |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Discharged.                      |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| State of Health on Discharge.    |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| State of Education on Discharge. |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Expiration of Term.              |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |

Brother 12,282.

No. 12,282.

Name

William White

Ser Male

Previously in the Institution

| Particulars.                     | State of Health on Admission. | Condition on Admission. | Where Stationed. | Date. | Half-Yearly Report |            |              |                               |                    |                  |                           |
|----------------------------------|-------------------------------|-------------------------|------------------|-------|--------------------|------------|--------------|-------------------------------|--------------------|------------------|---------------------------|
|                                  |                               |                         |                  |       | Date.              | Favorable. | Unfavorable. | No. of Days absent from Work. | School Attendance. | General Conduct. | Initials, Superintendent. |
| Date of Birth ... ..             |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Native Place ... ..              |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Religion ... ..                  |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Read or Write ... ..             |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Date of Commitment ... ..        |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Committing Bench ... ..          |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Date of Admission ... ..         |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Term ... ..                      |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Cause of Commitment ... ..       |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Parents living ... ..            |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Previous History.                |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| If Licensed Out.                 |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Date ... ..                      |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| To whom ... ..                   |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Trade ... ..                     |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Address ... ..                   |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| General Remarks.                 |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Discharged.                      |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| State of Health on Discharge.    |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| State of Education on Discharge. |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |
| Expiration of Term.              |                               |                         |                  |       |                    |            |              |                               |                    |                  |                           |

Brother 12,281

No. 12. 288.

Name

Peter Ramsay

Sex male

728

Previously in the Institution

yes vide Reg. No. 15. 856. folio. 442.

| Particulars.                           | State of Health on Admission. | Condition on Admission.                      | Where Stationed. | Date.                           | Half-Yearly Report. |
|----------------------------------------|-------------------------------|----------------------------------------------|------------------|---------------------------------|---------------------|
| (10) Date of Birth ... ..              | 2 <sup>nd</sup> May 1867.     | Sound                                        |                  |                                 |                     |
| Native Place ... ..                    | Melbourne                     |                                              |                  |                                 |                     |
| Religion ... ..                        | Presbyterian                  |                                              |                  |                                 |                     |
| Read or Write ... ..                   | No. 2                         |                                              |                  |                                 |                     |
| Date of Commitment ... ..              | 20/9/80.                      |                                              |                  |                                 |                     |
| Committing Bench ... ..                | Melbourne                     |                                              |                  |                                 |                     |
| Date of Admission ... ..               | 20/9/80.                      |                                              |                  |                                 |                     |
| Term ... ..                            | 3 years.                      |                                              |                  |                                 |                     |
| Cause of Commitment ... ..             | neglected.                    |                                              |                  |                                 |                     |
| Parents living ... ..                  | Mother.                       |                                              |                  |                                 |                     |
| Father. James Ramsay, dead.            |                               | Previous History. Mother. Janet Ramsay, born |                  |                                 |                     |
| Smithford Street, back of Smith's head |                               |                                              |                  |                                 |                     |
| If Licensed Out.                       |                               |                                              |                  |                                 |                     |
| Date ... ..                            |                               |                                              |                  |                                 |                     |
| To whom ... ..                         |                               |                                              |                  |                                 |                     |
| Trade ... ..                           |                               |                                              |                  |                                 |                     |
| Address ... ..                         |                               |                                              |                  |                                 |                     |
| General Remarks.                       |                               |                                              |                  |                                 |                     |
| Another 12. 289                        |                               |                                              |                  |                                 |                     |
| Discharged.                            |                               |                                              |                  |                                 |                     |
| State of Health on Discharge.          |                               | State of Education on Discharge.             |                  | Expiration of Term.             |                     |
|                                        |                               |                                              |                  | 20 <sup>th</sup> September 1883 |                     |

No. 12. 289

Name

James Ramsay

Sex male

Previously in the Institution

yes vide Reg. No. 15. 851. folio. 441.

| Particulars.                  | State of Health on Admission. | Condition on Admission.                         | Where Stationed. | Date.                           | Half-Yearly Report. |
|-------------------------------|-------------------------------|-------------------------------------------------|------------------|---------------------------------|---------------------|
| Date of Birth ... ..          | 12 <sup>th</sup> Aug 1869.    | Sound                                           |                  |                                 |                     |
| Native Place ... ..           | Melbourne                     |                                                 |                  |                                 |                     |
| Religion ... ..               | Presbyterian                  |                                                 |                  |                                 |                     |
| Read or Write ... ..          | No. 1                         |                                                 |                  |                                 |                     |
| Date of Commitment ... ..     | 20/9/80.                      |                                                 |                  |                                 |                     |
| Committing Bench ... ..       | Melbourne                     |                                                 |                  |                                 |                     |
| Date of Admission ... ..      | 20/9/80.                      |                                                 |                  |                                 |                     |
| Term ... ..                   | 5 years.                      |                                                 |                  |                                 |                     |
| Cause of Commitment ... ..    | neglected.                    |                                                 |                  |                                 |                     |
| Parents living ... ..         | Mother                        |                                                 |                  |                                 |                     |
| Father. James Ramsay, dead.   |                               | Previous History. Janet Ramsay, born, Smithford |                  |                                 |                     |
| Street, back of Smith's head. |                               |                                                 |                  |                                 |                     |
| If Licensed Out.              |                               |                                                 |                  |                                 |                     |
| Date ... ..                   |                               |                                                 |                  |                                 |                     |
| To whom ... ..                |                               |                                                 |                  |                                 |                     |
| Trade ... ..                  |                               |                                                 |                  |                                 |                     |
| Address ... ..                |                               |                                                 |                  |                                 |                     |
| General Remarks.              |                               |                                                 |                  |                                 |                     |
| Another 12. 288.              |                               |                                                 |                  |                                 |                     |
| Discharged.                   |                               |                                                 |                  |                                 |                     |
| State of Health on Discharge. |                               | State of Education on Discharge.                |                  | Expiration of Term.             |                     |
|                               |                               |                                                 |                  | 20 <sup>th</sup> September 1885 |                     |

729

No. 12294

Name

Philip Robertson

Sex male

Previously in the Institution

| Particulars.               | State of Health on Admission. | Condition on Admission.         | Where Stationed. | Date. | Half-Yearly Report |
|----------------------------|-------------------------------|---------------------------------|------------------|-------|--------------------|
| Date of Birth ... ..       | 15 <sup>th</sup> Aug 1880.    |                                 |                  |       |                    |
| Native Place ... ..        | W. Melbourne                  |                                 |                  |       |                    |
| Religion ... ..            | C. P.                         |                                 | W. Melbourne     | 19/80 |                    |
| Read or Write ... ..       | no.                           |                                 |                  |       |                    |
| Date of Commitment ... ..  | 30/9/80.                      |                                 |                  |       |                    |
| Committing Bench ... ..    | W. Melbourne                  |                                 |                  |       |                    |
| Date of Admission ... ..   |                               | If Vaccinated or had Small-pox. |                  |       |                    |
| Term ... ..                | 7 years                       | Particular Marks.               |                  |       |                    |
| Cause of Commitment ... .. | neglected                     |                                 |                  |       |                    |
| Parents living ... ..      |                               |                                 |                  |       |                    |

Previous History. *no. at present a patient in the Victoria Bend Asylum. The mother was a servant to a Miss Hamilton, of Victoria Street Melbourne. Aunt, Alice Robertson, servant, Model Lodging House, King St Melbourne*

If Licensed Out.

Date ... ..

To whom ... ..

Trade ... ..

Address ... ..

on remand from 2/9/80. brought to the General Remarks. *W. Melbourne by a nurse from the "Lying in Hospital"*

The father is said to be employed in the survey branch, of the Land Department

Discharged.

State of Health on Discharge.

State of Education on Discharge.

Expiration of Term.

30<sup>th</sup> September 1887

No. 12296

Name

Thomas Henry Gardiner

Sex male

Previously in the Institution

| Particulars.               | State of Health on Admission. | Condition on Admission.         | Where Stationed. | Date.   | Half-Yearly Report. |
|----------------------------|-------------------------------|---------------------------------|------------------|---------|---------------------|
| Date of Birth ... ..       | 3 <sup>rd</sup> March 1880.   | no.                             |                  |         |                     |
| Native Place ... ..        | Emerald Hill                  |                                 |                  |         |                     |
| Religion ... ..            | C. P.                         |                                 | W. Melbourne     | 1/5/80. |                     |
| Read or Write ... ..       | no.                           |                                 |                  |         |                     |
| Date of Commitment ... ..  | 13/10/80.                     |                                 |                  |         |                     |
| Committing Bench ... ..    | Emerald Hill                  |                                 |                  |         |                     |
| Date of Admission ... ..   | 13/10/80.                     | If Vaccinated or had Small-pox. |                  |         |                     |
| Term ... ..                | 7 years.                      | Particular Marks.               |                  |         |                     |
| Cause of Commitment ... .. | neglected.                    |                                 |                  |         |                     |
| Parents living ... ..      | no.                           |                                 |                  |         |                     |

Previous History. *no. deserted mother. Thomas Gardiner, a prostitute, was in the Melbourne Hospital, grandmother formerly of Victoria St. she is now living in the Melbourne Hospital. The mother was married to a man named John Gardiner, who has deserted her.*

If Licensed Out.

Date ... ..

To whom ... ..

Trade ... ..

Address ... ..

General Remarks.

Discharged.

State of Health on Discharge.

State of Education on Discharge.

Expiration of Term.

13<sup>th</sup> October 1887.

No. 12, 299.

Name

Robert Blair.

Sex male

730

Previously in the Institution

| Particulars.                                                                                                                                                                                                  | State of Health on Admission. | Condition on Admission. | Where Stationed. | Date. | Half-Yearly Report. |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------|------------------|-------|---------------------|
| Date of Birth ... ..                                                                                                                                                                                          |                               |                         |                  |       |                     |
| Native Place ... ..                                                                                                                                                                                           |                               |                         |                  |       |                     |
| Religion ... ..                                                                                                                                                                                               |                               |                         |                  |       |                     |
| Read or Write ... ..                                                                                                                                                                                          |                               |                         |                  |       |                     |
| Date of Commitment ... ..                                                                                                                                                                                     |                               |                         |                  |       |                     |
| Committing Bench ... ..                                                                                                                                                                                       |                               |                         |                  |       |                     |
| Date of Admission ... ..                                                                                                                                                                                      |                               |                         |                  |       |                     |
| Term ... ..                                                                                                                                                                                                   |                               |                         |                  |       |                     |
| Cause of Commitment ... ..                                                                                                                                                                                    |                               |                         |                  |       |                     |
| Parents living ... ..                                                                                                                                                                                         |                               |                         |                  |       |                     |
| <p>after being born Blair, dead. Previous History. Mother, Emily Blair, in the Melbourne Gaol; she is a drunkard, and prostitute. This child had been in of Mr. Rivers, of 12 Cordale St West, Melbourne.</p> |                               |                         |                  |       |                     |
| Date ... ..                                                                                                                                                                                                   |                               |                         |                  |       |                     |
| To whom ... ..                                                                                                                                                                                                |                               |                         |                  |       |                     |
| Trade ... ..                                                                                                                                                                                                  |                               |                         |                  |       |                     |
| Address ... ..                                                                                                                                                                                                |                               |                         |                  |       |                     |
| <p>Discharged. State of Health on Discharge. State of Education on Discharge.</p>                                                                                                                             |                               |                         |                  |       |                     |
| <p>Expiration of Term.</p>                                                                                                                                                                                    |                               |                         |                  |       |                     |

No. 12, 301.

Name

John Thomas.

Sex male

Previously in the Institution

| Particulars.                                                                      | State of Health on Admission. | Condition on Admission. | Where Stationed. | Date. | Half-Yearly Report. |
|-----------------------------------------------------------------------------------|-------------------------------|-------------------------|------------------|-------|---------------------|
| Date of Birth ... ..                                                              |                               |                         |                  |       |                     |
| Native Place ... ..                                                               |                               |                         |                  |       |                     |
| Religion ... ..                                                                   |                               |                         |                  |       |                     |
| Read or Write ... ..                                                              |                               |                         |                  |       |                     |
| Date of Commitment ... ..                                                         |                               |                         |                  |       |                     |
| Committing Bench ... ..                                                           |                               |                         |                  |       |                     |
| Date of Admission ... ..                                                          |                               |                         |                  |       |                     |
| Term ... ..                                                                       |                               |                         |                  |       |                     |
| Cause of Commitment ... ..                                                        |                               |                         |                  |       |                     |
| Parents living ... ..                                                             |                               |                         |                  |       |                     |
| <p>Discharged. State of Health on Discharge. State of Education on Discharge.</p> |                               |                         |                  |       |                     |
| <p>Expiration of Term.</p>                                                        |                               |                         |                  |       |                     |

731

No. ~~12302~~ 302.

Name

George A. Milner

Sex male

Previously in the Institution

| Particulars.               | State of Health on Admission. | Condition on Admission.          | Where Stationed. | Date. | Half-Yearly Report           |
|----------------------------|-------------------------------|----------------------------------|------------------|-------|------------------------------|
| Date of Birth ... ..       |                               |                                  |                  |       | Date                         |
| Native Place ... ..        |                               |                                  |                  |       | Favorable                    |
| Religion ... ..            |                               |                                  |                  |       | Unfavorable                  |
| Read or Write ... ..       |                               |                                  |                  |       | No. of Days absent from Work |
| Date of Commitment ... ..  |                               |                                  |                  |       | School Attendance            |
| Committing Bench ... ..    |                               |                                  |                  |       | General Conduct              |
| Date of Admission ... ..   |                               |                                  |                  |       | Initials                     |
| Term ... ..                |                               |                                  |                  |       | Superintendent               |
| Cause of Commitment ... .. |                               |                                  |                  |       |                              |
| Parents living ... ..      |                               |                                  |                  |       |                              |
|                            | Previous History.             |                                  |                  |       |                              |
|                            | If Licensed Out.              |                                  |                  |       |                              |
| Date ... ..                |                               |                                  |                  |       |                              |
| To whom ... ..             |                               |                                  |                  |       |                              |
| Trade ... ..               |                               |                                  |                  |       |                              |
| Address ... ..             |                               |                                  |                  |       |                              |
|                            | General Remarks.              |                                  |                  |       |                              |
| Discharged.                | State of Health on Discharge. | State of Education on Discharge. |                  |       | Expiration of Term.          |

No. 12304

Name

A Soundling

Sex male

Previously in the Institution

| Particulars.               | State of Health on Admission. | Condition on Admission.          | Where Stationed. | Date. | Half-Yearly Report           |
|----------------------------|-------------------------------|----------------------------------|------------------|-------|------------------------------|
| Date of Birth ... ..       |                               |                                  |                  |       | Date                         |
| Native Place ... ..        |                               |                                  |                  |       | Favorable                    |
| Religion ... ..            |                               |                                  |                  |       | Unfavorable                  |
| Read or Write ... ..       |                               |                                  |                  |       | No. of Days absent from Work |
| Date of Commitment ... ..  |                               |                                  |                  |       | School Attendance            |
| Committing Bench ... ..    |                               |                                  |                  |       | General Conduct              |
| Date of Admission ... ..   |                               |                                  |                  |       | Initials                     |
| Term ... ..                |                               |                                  |                  |       | Superintendent               |
| Cause of Commitment ... .. |                               |                                  |                  |       |                              |
| Parents living ... ..      |                               |                                  |                  |       |                              |
|                            | Previous History.             |                                  |                  |       |                              |
|                            | If Licensed Out.              |                                  |                  |       |                              |
| Date ... ..                |                               |                                  |                  |       |                              |
| To whom ... ..             |                               |                                  |                  |       |                              |
| Trade ... ..               |                               |                                  |                  |       |                              |
| Address ... ..             |                               |                                  |                  |       |                              |
|                            | General Remarks.              |                                  |                  |       |                              |
| Discharged.                | State of Health on Discharge. | State of Education on Discharge. |                  |       | Expiration of Term.          |

23rd October 1887.

No. 12,306. Name  
Previously in the Institution

William Smith.

Sex Male

| Particulars.                                              | State of Health on Admission. | Condition on Admission.          | Where Stationed.               | Date. | Half-Yearly Report |
|-----------------------------------------------------------|-------------------------------|----------------------------------|--------------------------------|-------|--------------------|
| Date of Birth ... ..                                      |                               |                                  |                                |       |                    |
| Native Place ... ..                                       |                               |                                  |                                |       |                    |
| Religion ... ..                                           |                               |                                  |                                |       |                    |
| Read or Write ... ..                                      |                               |                                  |                                |       |                    |
| Date of Commitment ... ..                                 |                               |                                  |                                |       |                    |
| Committing Bench ... ..                                   |                               |                                  |                                |       |                    |
| Date of Admission ... ..                                  |                               |                                  |                                |       |                    |
| Term ... ..                                               |                               |                                  |                                |       |                    |
| Cause of Commitment ... ..                                |                               |                                  |                                |       |                    |
| Parents living ... ..                                     |                               |                                  |                                |       |                    |
| Parents Thomas and Margaret Smith, a labourer, at Merino. |                               |                                  |                                |       |                    |
| Previous History. Smith dead. Brother James               |                               |                                  |                                |       |                    |
| If Licensed Out.                                          |                               |                                  |                                |       |                    |
| Date ... ..                                               |                               |                                  |                                |       |                    |
| To whom ... ..                                            |                               |                                  |                                |       |                    |
| Trade ... ..                                              |                               |                                  |                                |       |                    |
| Address ... ..                                            |                               |                                  |                                |       |                    |
| General Remarks.                                          |                               |                                  |                                |       |                    |
| Fm boy runs away from home, and sleeps out at night       |                               |                                  |                                |       |                    |
| Sister 12.315. 1883.                                      |                               |                                  |                                |       |                    |
| Discharged.                                               | State of Health on Discharge. | State of Education on Discharge. | Expiration of Term.            |       |                    |
|                                                           |                               |                                  | 14 <sup>th</sup> October 1886. |       |                    |

No. 12,309. Name  
Previously in the Institution

Alfred Hatchard.

Sex Male

| Particulars.                                                                                                                              | State of Health on Admission. | Condition on Admission.          | Where Stationed.               | Date. | Half-Yearly Report |
|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------|--------------------------------|-------|--------------------|
| Date of Birth ... ..                                                                                                                      |                               |                                  |                                |       |                    |
| Native Place ... ..                                                                                                                       |                               |                                  |                                |       |                    |
| Religion ... ..                                                                                                                           |                               |                                  |                                |       |                    |
| Read or Write ... ..                                                                                                                      |                               |                                  |                                |       |                    |
| Date of Commitment ... ..                                                                                                                 |                               |                                  |                                |       |                    |
| Committing Bench ... ..                                                                                                                   |                               |                                  |                                |       |                    |
| Date of Admission ... ..                                                                                                                  |                               |                                  |                                |       |                    |
| Term ... ..                                                                                                                               |                               |                                  |                                |       |                    |
| Cause of Commitment ... ..                                                                                                                |                               |                                  |                                |       |                    |
| Parents living ... ..                                                                                                                     |                               |                                  |                                |       |                    |
| Father Alfred Hatchard, a labourer. Previous History. deposed. he is wanted by the Police for housebreaking, mother. Grace Hatchard, dead |                               |                                  |                                |       |                    |
| If Licensed Out.                                                                                                                          |                               |                                  |                                |       |                    |
| Date ... ..                                                                                                                               |                               |                                  |                                |       |                    |
| To whom ... ..                                                                                                                            |                               |                                  |                                |       |                    |
| Trade ... ..                                                                                                                              |                               |                                  |                                |       |                    |
| Address ... ..                                                                                                                            |                               |                                  |                                |       |                    |
| General Remarks.                                                                                                                          |                               |                                  |                                |       |                    |
| Sister 12.315. 8.12.31. Brothers 12.311. 8.12.312.                                                                                        |                               |                                  |                                |       |                    |
| Discharged.                                                                                                                               | State of Health on Discharge. | State of Education on Discharge. | Expiration of Term.            |       |                    |
|                                                                                                                                           |                               |                                  | 28 <sup>th</sup> October 1887. |       |                    |

12.311

Previously in the Institution

Name

Ernest Hatchard. Sex male

| Particulars.               | State of Health on Admission. | Condition on Admission.          | Where Stationed. | Date. | Half-Yearly Report  |
|----------------------------|-------------------------------|----------------------------------|------------------|-------|---------------------|
| Date of Birth ... ..       | 6.5 Jan 1878.                 |                                  |                  |       |                     |
| Native Place ... ..        | Victoria                      |                                  |                  |       |                     |
| Religion ... ..            | ...                           |                                  |                  |       |                     |
| Read or Write ... ..       | Mr.                           |                                  |                  |       |                     |
| Date of Commitment ... ..  | 28/10/80.                     |                                  |                  |       |                     |
| Committing Bench ... ..    | Stamell                       |                                  |                  |       |                     |
| Date of Admission ... ..   |                               | If Vaccinated or had Small-pox.  |                  |       |                     |
| Term ... ..                | 7. years                      | Particular Marks.                |                  |       |                     |
| Cause of Commitment ... .. |                               |                                  |                  |       |                     |
| Parents living ... ..      |                               |                                  |                  |       |                     |
|                            | Previous History.             |                                  |                  |       |                     |
|                            | If Licensed Out.              |                                  |                  |       |                     |
| Date ... ..                |                               |                                  |                  |       |                     |
| To whom ... ..             |                               |                                  |                  |       |                     |
| Trade ... ..               |                               |                                  |                  |       |                     |
| Address ... ..             |                               |                                  |                  |       |                     |
|                            | General Remarks.              |                                  |                  |       |                     |
| Discharged.                | State of Health on Discharge. | State of Education on Discharge. |                  |       | Expiration of Term. |

No.

Name

Previously in the Institution

Sex

| Particulars.               | State of Health on Admission. | Condition on Admission.          | Where Stationed. | Date. | Half-Yearly Report  |
|----------------------------|-------------------------------|----------------------------------|------------------|-------|---------------------|
| Date of Birth ... ..       |                               |                                  |                  |       |                     |
| Native Place ... ..        |                               |                                  |                  |       |                     |
| Religion ... ..            |                               |                                  |                  |       |                     |
| Read or Write ... ..       |                               |                                  |                  |       |                     |
| Date of Commitment ... ..  |                               |                                  |                  |       |                     |
| Committing Bench ... ..    |                               |                                  |                  |       |                     |
| Date of Admission ... ..   |                               | If Vaccinated or had Small-pox.  |                  |       |                     |
| Term ... ..                |                               | Particular Marks.                |                  |       |                     |
| Cause of Commitment ... .. |                               |                                  |                  |       |                     |
| Parents living ... ..      |                               |                                  |                  |       |                     |
|                            | Previous History.             |                                  |                  |       |                     |
|                            | If Licensed Out.              |                                  |                  |       |                     |
| Date ... ..                |                               |                                  |                  |       |                     |
| To whom ... ..             |                               |                                  |                  |       |                     |
| Trade ... ..               |                               |                                  |                  |       |                     |
| Address ... ..             |                               |                                  |                  |       |                     |
|                            | General Remarks.              |                                  |                  |       |                     |
| Discharged.                | State of Health on Discharge. | State of Education on Discharge. |                  |       | Expiration of Term. |