Supervisor's Dist: No. Enumeration Dist: No.

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 14 Sestrick, in the County of Hankins , State of Semper . Mu Keile

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Name of the person deceased.	Black (Ch);	Place of blatt	Profession, Occupation or Trade.	The month	to a lifthe disease
	Online	Place of birth of this Where was the person, naming the State or Territory of the U.S., or the country, frof foreign birth,	Where was the Mother of the person boyul 10 years of age.) (As in column	the person Disease or cause of death.	was not con- tracted at place of death, state
	The man of the state of the sta	try, if of foreign birth. 9.	(As in column		s — sn e en e en e en e en e en e en e en e
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ray year.		the second of			36

# Note E - Upon this Schedule should be GAREFULLY RETURNED:

Ist. Every death which has occurred in this enumeration district during the Census year, whicher the decessed was of was not, at death, a member of any family which resided June 1, 1880, in the district.

2d. Every death which has occurred outside of this enumeration district during the Census, year, the decessed being at date of death a member of a family which resided June 1, 1880, in the enumeration district.

The enumerator should make these entries upon this Schedule with great care, seeking every source of information. When a positive statement is impossible, as when an age caryony be estimated, or a birth-piece must be conjectured, the entry may be inclosed in parentheses these must be conjectured, the entry may be inclosed in parentheses these must be captured that the best estimate of the large that can be given is 25 years.

Of the deaths reported above, the follows:	lowing occurred in this enumeration district, belonged, resided June 1, 1880, out of the

Place where the death occur

### INSTRUCTIONS.

The important point in this Schedule is the question in column 14, headed "Disease or cause of death." Especial pains must be taken in this column to make the answer full and exact, and to this end, attention is called to the following points:

Enter the name of the primary disease in all cases, and where the immediate cause of death has been a complication or consequence of the primary disease, enter that also. For instance, enter all cases of death resulting either immediately or remotely from measles, scarlet fever, typhoid fever, remittent fever; small pox; &c., under the names of those diseases, but add also dropsy, hemorrhage from the bowels, pneumonia, &c., if these occurred as complications and were the more immediate cause of death. In cases of death from hemorrhage, specify the origin of the hemorrhage, thus: hemorrhage from aortic aneurism, hemorrhage from ulcer of intestines in typhoid fever, hemorrhage from lungs, hemorrhage from wound of neck, &c. So also for abscess, aneurism, cancer, carbuncle, dropsy, tumor, uleer, specify the organ or part affected, as iliac abscess, abscess of liver; aneurism; carbuncle on lip; cancer of breast, cancer of uterus, cancer dropsy of chest, dropsy of abdomen; inflammation of brain, inflammation of liver; tumor of neck, tumor of abdomen; ulcer of face, ulcer of groin, &c. Typhus, typhoid, and typho-malarial fevers should be carefully distinguished. inquiry should be made for cases of "still-births," including infants born dead from whatever cause. As few deaths as possible should be reported under such general terms as disease of the throat, disease of the brain, disease of the liver, disease of the lungs, disease of the bowels, disease of the spine, &c. These should, as far as possible, be reported under special heads.

Make sure that the distinction between apoplexy, epilepsy, and paralysis is understood. Distinguish between acute and chronic bronchitis, acute and chronic dysentery or diarrhoea, acute and chronic rheumatism. Report cerebro-spinal

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A space is left at the bottom of each page of this Schedule for remarks. It is desired that the enumerators should there describe any particular malady or unusual or peculiar disease which has prevailed in the subdivision; and the supposed cause thereof. In case of any unusual number of deaths by violence or accident (as by the caving of a mine, or similar calamity), an explanation should be given in the space for remarks.

The enumerator should endeavor to see in person every physician residing in or near his enumeration district, who is named in this Schedule as the physician attending at death, and courteously invite him to inspect the entries in regard to the cause of death in his cases, and to verify or restate them as the facts may demand. For this purpose spaces are provided below, numbered to correspond with the lines of the Schedule upon the other side.

If the physician finds the entry in the Schedule correct and fully in accordance with the foregoing instructions he is requested to make the entry in the proper numbered space below: Correctly stated. If he does not deem it correct, it is desired that he restate the cause of death in the numbered space in accordance with his own views, signing each entry.

The enumerator should also inquire of each physician, within his enumeration district whether he has a record or register of deaths occurring during the Census year, kept at the request of the Superintendent of Census, and if so, will offer to take charge of and forward the same to the Census Office under his official frank.

4

the line to 5 upon case is	CAUSE OF DEATH	g.	SIGNATURE OF THE	the line	Cause of Deatil.	SIGNATURE OF THE ATTENDING PHYSICIAN.	of the line ule 5 upon iis case is	CAUSE OF DEATE	н.	SIGNATURE OF THE ATTENDING PHYSICIAN
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Received July 9,4880,

Page No. Supervisor's Dist: No. 157 Enumeration Dist: No. 75-

The Census Year begins June 1, 1879, and ends May 31, 1880.

In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus /, except in the osse of Divorced persons, column 8, when the letter "D" is to be used.

For instructions relative to the entries in column 14, see back of this Schedule.

In column 17, note distinctly if no Physician was in attendance, thus (None.)

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 1 stes torict, in the County of

Home		0 10						. / - 1 1	174		E	numerator.		
Number of the family as given in col- min numbered 2—Schedule 1.	Name of the person deceased.	Age at last birthday. If under I year, give mouths in fractions, thus—A. If under I mouth, give days in fractions, give	Sex - Male (M).  Sex - Male (M).  Color - Walte (W). Black (B). Mulatto (Mn). Chienes (Ch). Indian (I).	Mhat was the civil of the person who died?  Widowed Nidowed D. Arabica Marian M	Place of birth of the person, maning the the U. S., or the even try, if of foreign birth	Nativity.  Where was the Father of the Person born (As in column), (6.)	Where was the set of this person born? (As in column 9.)	Profession, Occupations of Trade, (Not to be asked in respect to person under the profession of the pr	The month in which the person diel.	Disease or cause of death.	How long a resident of the county? If less than 1 year, state months in fractions, thus — \$\delta\$.	If the disease was not con- traceled ut place of death, state the plate.	Name of	ajjending Physician.
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Note E.—Upon this Schedule should be CAREFULLY RETURNED:

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State. -N.

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CAUSE OF DRATH.  SIGNATURE OF THE ATTENDING MUYSICIAN.  Primary.  Primary.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH	SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DRATE	Immediate.	SIGNATURE OF THE ATTENDING PRESIDENT.
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Page No.	./		1
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Supervisor's	DISC: NO	11	******
Enumeration	Dist: No	70	

A.—The Census—Tear begins June 1, 1879, and ends May 31, 1880.

B.—In making entries in columns 6, 7, and 8, an affirmative mark only will be used case of Divorced persons, column 8, when the letter "D" is to be used.

C.—For instructions relative to the entries in column 14, see back of this Schedule.

D.—In column 17, note distinctly if no Physician was in attendance, thus (None.)

SCHEDULE 5.—Persons	who DIED during	the Year endir	g May 31, 1880	, enumerated b	oy me in	15 Givil	District	, in t	the County
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					2 3		Enumerator.	
object in column of the column	Personal Description.	What was the civil condition of the per- son who died?	N.	ATIVITY.			te months in	
Name of the person deceased.	t birthday. If un noths in fractions, il for the days le (M). le (M).	1./ Divorced	Place of birth of this W person, naming the State or Territory of the U.S., or the coun- try, if of foreign birth,	there was the Where was the Father of this Mother of this person born? As in column (As in column (S.))	Profession, Occupation or Trade.  (Not to be asked in respect to persons under 16 years of age.)  The month in which the person died.	Disease or cause of death.	If the disease was not contracted at place of death, state the place.	nne of attending Physician.
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Note E — Upon this Schedule should be CAREFULLY RETURNED:

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-	Of the deaths reported above, the following occurred in this enume	ration district
but	the families to which the deceased belonged, resided June 1, 18 meration district, as follows:	80, out of the

Place where the family of the deceased resided June 1, 1880.

County.

Of the deaths reported above, the following occurred out of this enumeration district, though the families to which the deceased belonged, resided June I; 1880 at this enumeration district, as follows:

is reported above.	Town.	County:	State.
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V (-222.)

Page No. ... Supervisor's Dist: No. Enumeration Dist: No.

A.—The Census Year begins June 1, 1879, and ends May 31, 1880.

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C.—For instructions relative to the entries in column 14, see back of this Schedule.

D.—In column 17, note distinctly if no Physician was in attendance, thus (Nose.)

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 4th livil List, in the County of Heaveline, State of Jennessee, S.M. Slater,

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2	ar ar	2	7 .	. 9	1	Profession, Occupation or Trade.	The month	/	if the diseas	
Name of the person deceased.	Blac Blac	, oro	Place of Nirth of this	Where was the		104	The month in which the person died.	Disease or cause of death.	If the disease was not contracted at place of death, start the place.	Name of attending Physician.
44	Part S	10	Place of birth of this person, naming the State or Territory of the U.S., or the coun- try, if of foreign birth.	Where was the Father of this person boin? (As in column	Where was the Mother of this person born? (As in column	spect to persons under	died.		of death, stat	e stand of attending Physician.
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Note E.—Upon this Schedule should be CAREFULLY RETURNED:

lat. Every death which has occurred in this enumeration district during the Census year, whether the deceased was or was not, at death, a member of any family which resided June 1, 1880, in the district.

2d. Every death which has occurred outside of this enumeration district during the Census year, the deceased being at date of death a member of a family which resided June 1, 1880, in the enumeration district.

The snumerator should make these entries upon this Schedule with great care, seeking every source of information. When a positive statement is impossible, as when an age can only be estimated, or a birth-piece must be conjectured, the entry may be inclosed in parentheses, thui: Age (25), meaning that the best estimate of the age, that can be given is 26 years.

Of the deaths reported above, the following occurred in this enumeration district, but the families to which this deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:

Phace where the family of the deceased resided June 1, 1880.

REMARKS.

The attending Physician in eases Number 9, 10, 17 and 12 him perfectional Buisness therifore could not get his Certificate him absent ou

### INSTRUCTIONS

The important point in this Schedule is the question in column 14, headed "Disease or cause of death." Especial pains must be taken in this column to make the answer full and exact, and to this end, attention is called to the following points:

Enter the name of the primary disease in all cases, and where the immediate cause of death has been a complication or consequence of the primary disease, enter that also. For instance, enter all cases of death resulting either immediately or remotely from measles, scarlet fever, typhoid fever, remittent fever, small por, &c., under the names of those diseases, but add also dropsy, hemorrhage from the bowels, pneumonia,-&c., if these occurred as complications and w re the more immediate cause of death. In cases of death from hemorrhage, specify the origin of the hemorrhage, thus: hemorrhage from aortic aneurism, hemorrhage from ulcer of intestines in typhoid fever, hemorrhage from lungs, hemorrhage from wound of neck, &c. So also for abscess, aneurism, cancer, carbuncle, drepsy, tumor, ulcer, specify the organ or part affected, as iliac abscess, abscess of liver; femoral aneurism; carbuncle on lip; cancer of breast, cancer of uterus, cancer of face; dropsy of chest, dropsy of abdomen; inflammation of brain, inflammation of liver; tumor of neck, tumor of abdomen; ulcer of face, ulcer of groin, &c. Typhus, typhoid, and typho-malarial fevers should be carefully distinguished. inquiry should be made for cases of "still-births," including infants born dead from whatever cause. As few deaths as possible should be reported under such general terms as disease of the throat, disease of the brain, disease of the liver, disease of the lungs, disease of the bowels, disease of the spine, &c. These should, as far as possible, be reported under special heads.

Make sure that the distinction between apoplexy, epilepsy, and paralysis is inderstood. Distinguish between acute and chronic bronchitis, acute and chronic dysentery or diarrhoea, acute and chronic rheumatism. Report cerebro-spinal

meningitis as cerebro-spinal fever. Do not report as the cause of death old-age, or intemperance, or debility, or paralysis of the heart, or sudden death, in any case where it is possible to name any definite disease. In reporting suicide name the means, whether cutting of froat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

A space is left at the bottom of each page of this Schedule for remarks. In is desired that the enumerators should there describe any particular malady or unusual or peculiar disease which has prevailed in the subdivision, and the supposed cause thereof. In case of any unusual number of deaths by violence or accident (as by the caving of a mine, or similar calamity), an explanation should be given in the space for remarks.

The enumerator should endeavor to see in person every phician residing in or near his enumeration district, who is named in this Schedule as the physician attending at death, and courteously invite him to inspect the entries in regard to the cause of death in his cases, and to verify or restate them as the facts may demand. For this purpose spaces are provided below, numbered to correspond with the lines of the Schedule upon the other side.

If the physician finds the entry in the Schedule correct and fully in accordance with the foregoing instructions he is requested to make the entry in the proper numbered space below: Correctly stated. If he does not deem it correct, it is desired that he restate the cause of death in the numbered space in accordance with his own views, signing each entry.

The enumerator should also inquire of each physician within his enumeration district whether he has a record or register of deaths occurring during the Census year, kept at the request of the Superintendent of Census, and if so, will offer to take charge of and forward the same to the Census Office under his official frank.

Number of the line	on Schelule 5-upon. which this case is reported.	CAUSE OF DEATH	I. Immediate.	SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEAT	n. Immediate.	Signature of the Attending Baysician.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEAT	Immediate:	SIGNATURED THE ATTENDING PHYSICIAN.
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Note A.—The Census Year begins July 1, 1879, and ends May 31, 1880.
Note B.—In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 8, when the letter "D" is to be used.
Note C.—For instructions relative to the entries in column 14, see back of this Schedule.

Note D.—In column 17.

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Thanking his property of State of Newsons.

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Name of the person deceased.	If under fores, thrue days in t eek (B).		Profession	Occupation The month		te mon	
	Thinky.  In fract.  M. M. M. M. Chinese (F).	Place of birth of this person, faming the State or Territory of the B. S., or the country, if of foreign birth.	the Where was the Mothes of this a pect to p no (As in column	The month in which the persons under age.)	Disease of cause of death.	If the disease was gipt con- tracted at place of death, state	Name of attending Physicia
	at last bit on the last bit on the last bit on the last last last last last last last last	the U.S., or the country, if of foreign birth.	nn (As in column 9.)	age.)		the place	
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		Of the deaths report	ed above, the following occurred in	this enumeration district	. 1		
Upon this Schedule should be C. Ty death which has occurred in	AREFULLY RETURNED		ed above, the following occurred in the the deceased belonged, resided follows:	June 1, 1880, out of the -	Of the deaths reported ab district, though the families to this enumeration district, as foll	ove, the following occurred which the deceased belonged ows:	out of this enumeration resided June 1, 1880, in
any family which resided June	e 1, 1880, in the district	th, a line upon which the case	where the family of the deceased	resided June 1, 1880. N	Number of the line upon which the case is reported above. Town.	Place where the death occu	-/-
a family which resided June	sed being at date of dea	th 4	County	State.	is reported above. Town.	County	State.
merator should make these enti- socking every source of inf is impossible, as when an age must be conjectured, the entry Age (25), meaning that the best 25 years.	ries upon this Schedule	with .	5	•			11/11/1
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Age (25), meaning that the best 25 years.	estimate of the age that	onial .	3				
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# INSTRUCTIONS.

The important point in this Schedule is the question in column 14, headed "Disease or cause of death." Especial pairs must be taken in this column to make the answer full and exact, and to this end, attention is called to the following points:

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-The Census Year begins June 1, 1879, and ends May 31, 1880.
-In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 8, when the letter "D" is to be used.
-For instructions relative to the entries in column 14, see back of this Schedule.
-In column 17, note distinctly if no Physician was in attendance, thus (None.)

SCHEDULE 5 .- Persons who DIED during the Year ending May 31, 1880, enumerated by me in the Ith level District in the County of Hawkins , Ino. 2. A. Stephenson , State of Tennessee

		N				,	2	. Dr. Organization	Enumerator.	
2	Personal Description.	What was	1		-	T .	1		Les	
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section section	ne, the	d Pa				Profession, Occupation of Trade.	The month	/		
Name of the person deceased.	ractio give d give d 	Nore	Place of birth of this	Where was the	Where was the		In which the person	. Disease or cause of death,	was not com- tracted at place of death, state	Name of lattending Physician.
Harrie and the second	ON SECTION	ā - ā	Piace of birth of this person, naming the State or Territory of the U.S., or the coun- try, if of foreign birth,	Father of this person born? As in column	Where was the Mother of this person born? (As in column	10 years uf age.)	died:		the place.	
		T P	try, if of foreign birth.	. 0.	9.)	£ .			AG 6	*
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1 Grabtree, John	78 M. 71	/	Virginia	Virginia	-Virginia	Farmer	Febru	Disease not known	3	No Physician
· Coabtree, John Me	3 16 4	1	Johnessee &				Wast	Bold Hives	3	No Physician
brabtree.	30 7 7		Tennessee		Jinnesso		A	Disease not known	3_	No, hysician
Darter, Stephen				01	N	0	June	Disease not known	30	No Physician
			vennessee	origina	Vennessee	Divine or Presiden	November	Syphoid Tever	53	Hoffman, Jones & Patton.
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Porter, Mary			$v\alpha$ .	Verginia	Vaginia	House Oversear	May	Spinal Affection	25	William Le Mondy
Holf, Thomas	63 M 6	0 /	Virginia	Ma.	Va.			The hate 37-9	weaker	William L. Moody
Bradshaw, Rosanna	120 F W	1	Jannessee	Jenn.	Jenn.			Humorrhage of the Homb	20	Willace, Patton & Heooday.
V Gibbones, William J.	6 NG TH	-	Sennessee	Jenn.	Jenn.		D	Bronchitis	20	
V. Green , Semima L.	55 F. W	1-7		~		1/2 1. 1	December	13ronchiles	J. HI	Jones & Moraly.
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The enumerators should make these entries upon this Schedule with freat care, seeking every source of information. When a positive statement is impossible, as when an age cary only be estimated, or a birth-place must be conjectured, the entry may be inclosed in parentheses thus: Age (25), meaning that the best estimate of the igge that can be given is 23 years.

Of the deaths reported	shows the full	wine occurre	of in this area	mounties distaint
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out the nimities to which	he deceased t	elonged, resi	ded June 1,	_1~50, out of the
enumeration district, as follo	W8:			

REMARKS.

Darler Stephen had been Beaching the boshel for 20 years in the Missionary Baptist Cohurch

lst. Every death which has occurred in this enumeration district during the Census year, whether the deceased was or, was not, at death, a sember of any family which resided June 1, 1880, in the district.

2d Every death which has occurred outside of this enumeration district during the Census year, the deceased being at date of death a member of a family which resided June 1, 1880, in the enumeration district.

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entries in claumis 6,7, and 8, an affirmative mark only will be used, thus // except in the lyoroed persons, column 8, when the letter "D" is to be used. titles relative to the entries in column 14, see back of this Schedule.
17, note distinctly if no Physician was in attendance/thus (Nos.)

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Scient Just. Diegenerall), in the County of Marchine , State of Thomassu , Amul hit.

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Name of the person deceased	ff unde	ck (B).	od Do	• 400			Profession, Occupation or Trade.	The month		or the	If the disease	
477 278	fracti o fracti	F). Bla	Divor	Place of birth of the person, manning the State or Territory the U.S., or the courtry, if of foreign bir	is Where was the	Where was the Mother of this	(Not to be asked in re- spect to persons under 10 years of age,)	The month in which the person sdied,	Disease or cause of death.	Tage 1	was not con- tracted at place of death; state	Name of attending Physician.
of the second	onthe to	male (M	, P	the U.S., or the cor try, if of foreign bir	where was the fee Father of the person torns (As in column th, 9.)	Where was the Mother of this person born? (As in column	10 years of age.)			Ba res	the places	
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114, farking Charlotte	18	s w	1. (8	Harrim Ten		Jun	W. Occupation	Mai.	Consumption 0	- 5	Virginia	Dr. Jones .
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higher Consus year, whether the deceased was or was not, at death, a member of any family which resided June 1, 1880, in the district, 2d Every death which has occurred outside of this enumeration district during the Census year, the deceased being at date of death a member of a family which resided June 1, 1880, in the enumeration listner.

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meningitis as eerebro-spinal fever. Do not report as the cause of death old age, or intemperance, or debility, or paralysis of the heart, or sudden death, in any case where it is possible to name any definite disease. In reporting suicide name the means, whether cutting of throat, hanging, drowning, shooting, poisoning by opium, arsenic, &&

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Note A.—The Census Year begins June 1, 1879, and ends May 31, 1880.

Note B.—In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 8, when the letter "D" is to be used.

Note C.—For instructions relative to the entries in column 14, see back of this Schedule.

Note D.—In column 17, note distinctly if no Physician was in attendance, thus (None.)

SCHEDULE 5 .- Persons who DIED during the Year ending May 31, 1880, enumerated by me in 9th Dich ( Watterson ) Hawkins , Newton J. Beal , State of Tennessee

, in the County of

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Note E.—Upon this Schedule should be CAREFULLY RETURNED:

As Every death which has occurred in this enumeration district during the Census year, whether the deceased was or was not, at death, a member of any family which resided June 1, 1880, in the district.

2d. Every death which has occurred outside of this enumeration districturing the Census year, the deceased being at date of death a member of a family which resided June 1, 1880, in the enumeration district during the Census year, the deceased being at date of death a member of a family which resided June 1, 1880, in the enumeration district.

The enumerator should make these entries upon this Schedule with four care, seeking every source of information. When a positive statement is impossible, as when an age can only be estimated, or britisplace must be conjectured, the entry may be inclosed in parenthese that: Age (26), meaning that the best estimate of the age that can be given is 25 years.

Place where the death occurred.

REMARKS.

July to 67. Out still birth occurred Feby 1st 1880 cause supposed to be over work.

## INSTRUCTIONS

The important point in this Schedule is the question in column 14, headed "Disease or cause of death." Especial pains must be taken in this column to make the answer full and exact, and to this end, attention is called to the following points:

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CAUSE OF DEATH.  SIGNATURE OF THE ATTENDING PHYSICIAN  PHYSICIAN  PHYSICIAN  Immediate.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEA	Immediate.	SIGNATU & OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEAT	II. Implydiate.	ASIGNATURE OF THE ATTENDING PHYSICIAN.
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Received July 5

Page No. 74
Supervisor's Dist: No. 1et
Enumeration Dist: No. 83

Note A.—The Census Year begins June 1/1879, and ends May 31, 1880.

Note B.—In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus / except in the case of Divorced persons, column 8, when the letter "D" is to be used.

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SCHEDULE 5.—Person	I T				- '	4	t		
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the E—Upon this Schedule should be CAREFULLY RETURN st. Every death which has occurred in this enumeration distr	Example 1	district, though the familie this enumeration district, a	s to wmen the deceased belonged resided June 1, 1880, in
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REMARKS.

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Enumeration Dist: No. 84 SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 2 4 13 Districts, in the County of Hawkins, State of Dunesser, Son armirain

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Note E.—Upon this Schedule should be			NED: enun	eration district, as foll	ows:	belonged, resided June 1.	1880, out of th	this enumeration d	istrict, as follows	h the deceased belong	ed out of this enumeration red, resided June 1, 1880, in
lst. Every death which has occurred ing the Census year, whether the dece	assed was or v	rea not of	douth a	the Place	where the famil	y of the deceased resided J	ane 1, 1880.	Number of the line upon	· [ P	lace where the death o	ocurred.
member of any family which resided J 2d Every death which has occurred	outside of this	a anumere	tion dia-	Town.		County.	State.	Number of the line upon which the case is reported above.	Town.	County.	State.
nember of a family which resided J	eased heing	at data of	death a	1			•	•			
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REMARKS. Mere airies, and lives about three weeks after the death of the mothers.

It would take 3 or 4 days to got Doctors Certificates, as only one lives in my commention tristricts, the others living morth to South from the to fifteen miles, from the trist as they have all sent the list of persons who die during the Census year, the diseases to to the Superintendent of Census that selves, by looking at the above physicians reports, they will no don't correspond - from the selves will no don't correspond - took mineral

Tote A.—The Census Year begins June 1, 1879, and ends May 31, 1880.

Received July 19, 1880.

Osso of Divorced persons, column 6, 7, and 6, are affirmative mark only will be used, thus / except in the

Note C.—For instructions relative to the entries in column 14, see back of this Schedulin Note D.—In column 17, note distinctly if no Physician was installed to the scheduling the column 17, note distinctly if no Physician was installed to the column 18.

1007

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 11 the civil Datact, in the County of George Warrens., State of Fernessee, George WB 2006.

		ATTENDED TO A SECOND		,	03 10000		
	Personal Description. What the cond of the	at was civil itition c per- who ed?			na ya	Enumerator.	
Name of the person deceased.	. If under sections in the free days in it. Free days in it. Black (B). I as ee (Ch). Ind	Discount Dis	Profession, or T	Occupation The month in which	of the co	If the Manual	
	inst birthday genths in fr et month, g 26 trale (F), white (W), ffu), Chine	person, naming the State or Territory of the U.S., or the country, if of foreign birth.	the Where was the this Mother of this person born? (As in column	asked in re- ersons under died. Disea	se or cause of death.	was not con- tracted at place of death, state the place.	ding Physician.
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Upon this Schedule should be	CAREFULLY RETUR	Of the deaths report but the families to when the enumeration district, as	rted above, the following occurred in ich the deceased, belonged, resided follows:	this enumeration district, June 1, 1880, out of the	f the deaths reported above, the fe t, though the families to which the	blowing occurred out of this enum deceased belonged resided June 1, 1	feration 1880, in
ery dee 'n Which has come	ine 1, 1880, in the distri	t death, a line upon which the case is terrortee.	ce where the family of the deceased			nere the death occurred.	1000, m
of a family which resided Ju	outside of this enumera sessed being at date of the 1, 1880, in the enu-	death a meration	Mawkins	State.  Sumber of line upon which the call reports above.	1 Town.	County. Sta	ite.
should make these e	intries upon this Sched information. When a ge can only be estimate ry may be inclosed in p	tule with 2 positive 5 ted, or a 5	Hawkins	Jenn !			4
meaning that the ent	ry may be inclosed in p	arenthe-	Hawkins	dem .			

Supervisor's Dist: No. Enumeration Dist: No. 56

Note A.—The Census Year begins June 1, 1879, and ends May 31, 1880.

Note B.—In making entries in columns 6, 7, and 8, an affirmative mark only will be used.

Note C.—For instructions relative to the entries in column 14, see back of this Schedule.

Note C.—For instructions relative to the entries in column 14, see back of this Schedule.

Note D.—In column 17, note distinctly if in Physician was in attentiance, time (Mosc.)

1008

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Turth level Duties, in the County of Handing , State of Jenuseum , Level While

t.	Personal Description	What was					1	Taranta and the	1 54	
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Name of the person deceased,	fr un fonn, t days days (Ch).	poa				Profession, Occupation or Trade.	The month	Diverse or cause of death	If the disease was not con-	Name of attending Physician
	A give	Divo	Place of birth of the person, naming the State or Territory the U.S., or the country, if of foreign birth	is Where was the Father of the	Mother of this- person born?	(Not to be asked in re- spect to persons under 10 years of age.)	the person died.	Previous Cause of death.	of death, state	1
	month in the in month in the CM	1 X 2	the U.S., or the cour try, if of foreign birt	(As in colum	As in column	).		1	and .	
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Roffit Mille .	7 711 13				elase-					

Note E.—Upon this Schedule should be CAREFULLY RETURNED:

Int. Every death which has occurred in this enumeration district durbs the Consus year, whether the deceased was or was not, at death, a member of any family which resided June 1, 1880, in the district.

2d. Every death, which has occurred outside of this enumeration district during the Census year, the deceased being at date of death member of a family which resided June 1, 1880, in the enumeration district.

enumerator should make these entries upon this Schedule with care, seeking every source of information. When a positive next is impossible, as when an age can only be estimated, or a place must be conjectured, the entry may be inclosed ir parenthe-um. Lage (25), meaning that the best estimate of the age that can on is 25 years.

Supervisor's Dist: No. Enumeration Dist: No.

The Census Yeas begins June 1, 1879, and ends May-31, 1880.

making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus / except in the case of Divorced persons, column 8, when the letter "D" is to be used.

or instructions relative to the entries in column 14, see back of this Schedule.

column 17, note distinctly if no Physician was in attendance, thus (Note.)

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 10 Control in the County of

**	1 5,0	3000							Ent	imerator.	
Name of the person deceased.	Age at last birthday. If under 1 year, where the bring of the control of the cont	Married (Ch) Single (Ch) Married (Ch) Marrie	Place of birth of th person, maning it state or Ferringy the life of the person of the try, if of foreign birt	NATIVITY.	Where was the Mother of this person, born? (As in column 9.)	Profession, Occupation or Trule. (No) to be asked in respect to person under 10 Years of sage 2 gg	The month in which the person died.	Jobsense or cause of death.	How long a resident of the county of the Trees than I year, state months in fractions, thus "A."	f the disease was not con- tracted the place. Name of att the place.	ending Physician.
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Note E.—Upon this Schedule should	be CAREFU	LLY RETU	RNED: bi	Of the deaths re ut the families to numeration district,	ported above, the f which the decease as follows:	ollowing occurred in this e	numeration dis 1, 1880, out o	f the district, though the this enumeration dis	eported above, the amilies to which t trict, as follows:	e following occurred out of the deceased belonged, resided	his enumeration June 1, 1880, in
lst. Every death which has occurred ing the Census year, whether the de	ed in this ann	meretion d				ally of the deceased reside		Number of the line upon which the case	- Place	where the death occurred.	
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trict during the Census year, the d member of a family which resided			of death a						1/25	1	
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orth-piace must be conjectured, the ses, thus: Age (25), meaning that the									14.7	1 No. 17	
be given is 25 years.	. 0	<									0

## INSTRUCTIONS

The important point in this Schedule is the question in column 14, headed "Disease or cause of death." Especial pains must be taken in this column to make the answer full and exact, and to this end, attention is called to the following points:

Enter the name of the primary disease in all cases, and where the immediate cause of death has been a complication or consequence of the primary disease, enter that also. For instance, enter all cases of death resulting either immediately or remotely from measles, searlet fever, typhoid fever, remittent fever, small pox, &c., under the names of those diseases, but add also dropsy, hemorrhage from the bowels, pneumonia, &c., if these occurred as complications and were the more immediate cause of death. In cases of death from hemorrhage, specify the origin of the hemorrhage, thus: hemorrhage from aortic aneuril n, hemorrhage from ulcer of intestines in typhoid fever, hemorrhage from lungs, hemorrhage from wound of neck, &c. So also for abscess, aneurism, cancer, carbuncle, dropsy, tuner uleer, specify the organ or part affected, as iliac abscess, abscess of liver; fer aneurism; carbuncle on lip; cancer of breast, cancer of uterus, cancer of face; dropsy of chest, dropsy of abdomen; inflammation of brain, inflammation of liver; tumor of neck, tumor of abdomen; ulcer of face ulcer of groin, &c. Typhus, typhoid, and typho-malarial fevers should be carefully distinguished. Especial inquiry should be made for cases of "still-births," including infants born dead from whatever cause. As few deaths as possible should be reported under such general terms as disease of the throat, disease of the brain, disease of the liver, disease of the lungs, disease of the bowels, disease of the spine, &c. These should, as far as possible, be reported under special heads.

Make sure that the distinction between apoplexy, epilepsy, and paralysis is understood. Distinguish between acute and chronic bronchitis, acute and chronic dysentery or diarrhoa, acute and chronic rheumatism. Report cerebro-spinal

meningitis as cerebro-spinal fever. Do not report as the cause of death old appearance, or debility, or paralysis of the heart, or sudden death, in any case where it is possible to name any definite disease. In reporting suicide name the means, whether cutting of throat, hanging, drowning, shooting, poisoning by opium, arsenite.

A space is left at the bottom of each page of this Schedule for semarks is desired that the enumerators should there describe any particular malady or usual or peculiar disease which has prevailed in the subdivision, and the suppose cause thereof. In case of any unusual number of deaths by violence or accident (as by the caving of a mine, or similar calamity), an explanation should be given in the space for remarks.

The enumerator should endeavor to see in person every physician residing or near his enumeration district, who is named in this Schedule as the physicia attending at death, and courteously invite him to inspect the entries in regard the cause of death in his cases, and to verify or restate them as the facts may demand. For this purpose spaces are provided below, numbered to correspond with the lines of the Schedule upon the other side.

If the physician finds the entry in the Schedule correct and fully in accounce with the foregoing instructions he is requested to make the entry in the pronumbered space below: Correctly stated. If he does not deem it correct desired that he restate the cause of death in the numbered space in accord with his own views, signing each entry.

The enumerator should also inquire of each physician within his enumeration district whether he has a record or register of deaths occurring during the Census year, kept at the request of the Superintendent of Census, and if so, will offer to take charge of and forward the same to the Census Office under his official frank.

or Schedule 5 upon which this case is reported.	CAUSE OF DEATH.  Primary. Immediate.	SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH	Immediate.	SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DRAT	Immediate.	SIGNATURE OF THE ATTENDING PHYSICIAN.
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