

Received July 9, 1880.

713

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, where 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 14 District, in the County of Hawkins, State of Tennessee.

1.	2.	3.			6.	7.	8.	9.			12.	13.	14.	15.	16.	17.
		Name of the person deceased.	Age at last birthday, or under 1 year, state months and days.	Sex.	Color.	White (W), Black (B), Red (R), Chinese (Ch), Indian (I).	Married (M), Single (S), Divorced (D).	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the father of this person born? (As in column 9.)	Where was the mother of this person born? (As in column 9.)	Profession, Occupation or Trade. (Not to be asked in respect to persons under 10 years of age.)	The month in which the person died.	Disease or cause of death.	How long a resident of the place where the person died, if less than 1 year, state months and days.	If the disease was not contracted at place of death, state the place.	Name of attending Physician.
10		Solomon Eliza	58	W				Virginia	Virginia	Virginia	Servant	Sept				
11		Myrland B. B.	70	M	W			Tenn	Tenn	Virginia						
13		Solomon S. S.	1	M	W			Tenn	Tenn	Tenn						
18		Frathers H. B.	74	M	W			Tenn	Tenn	VA			Sept Brain Fever	2		Dr Nelson Koon
21		Smith Corda	1	W				Tenn	Tenn	Tenn			Jan Whooping Cough	1		Dr A. M. Heathers
28		Bulligan N. A.	23	W				Tenn	Tenn	Tenn			May Congestion Brain	4 1/2		Dr A. M. Heathers
34		Kenigly Charly	42	M	W			Tenn	Tenn	Tenn	Keyping Kona	July	Sept 1880	23		Dr A. M. Heathers
57		Walter Josephum	34	W				Tenn	Tenn	Tenn	Keyping K. Hil.	Oct	Sept 1880	4 1/2		Dr A. M. Heathers
74		Walter Josephum	34	W				Tenn	Tenn	Tenn	Keyping K. Hil.	Oct	Sept 1880	4 1/2		Dr A. M. Heathers
85		Walter Josephum	34	W				Tenn	Tenn	Tenn	Keyping K. Hil.	Oct	Sept 1880	4 1/2		Dr A. M. Heathers
85		Walter Josephum	34	W				Tenn	Tenn	Tenn	Keyping K. Hil.	Oct	Sept 1880	4 1/2		Dr A. M. Heathers
50		Short Sally	51	W				Tenn	VA	VA	Keyping K. Mar		Neuralgia	13		Dr Hoans
11		Wolf Mary	41	W				Tenn	Tenn	VA	Keyping K. Mar		Critism days	51		Dr Horner
119		Kelly Robert	2	M	W			Tenn	Tenn	Tenn	Keyping K. Mar		Critism days	41		Dr Raden
135		Kelly Nancy	18	W				Tenn	Tenn	Tenn	Keyping K. Mar		May Neural afft	2		
143		Kelly Belle	4	M	W			Tenn	Tenn	Tenn	Keyping K. Mar		Sept 1880	18		Dr Phillips
154		Kelly Miller	84	M	W			Tenn	Tenn	Tenn	Keyping K. Mar		Sept 1880	12		Dr Phillips
72		M. Taylor	44	W				VA	VA	VA	Keyping K. Mar		Sept 1880	64		Dr Hoans
											Keyping K. Mar		Sept 1880			J. H. Rhodes

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.		
	Town.	County.	State.

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

REMARKS.

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, 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

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 DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1				13				25			
2				14	Scarlet			26			
3				15				27			
4	Scarlet			16				28			
5	Scarlet			17				29			
6				18				30			
7	Laryngitis			19				31			
8	Scarlet			20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

Page No. 1
Supervisor's Dist. No. 107
Enumeration Dist. No. 75

(7-282.)

Received July 9, 1880.

995

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 1st Dist. Civil, in the County of Hamilton, State of Tenn, Mm Keel

Enumerator.

Number of the family as given in original record—unchanged.		Personal Description.				What was the civil condition of the person who died?			NATIVITY.			Profession, Occupation, or Trade.		The month in which the person died.		Disease or cause of death.		How long a resident of the county in which the death occurred.		If the disease was not contracted at place of death, state the place.		Name of attending Physician.	
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.							
✓	Mom Mary	48	F	W	/	Tenn	Tenn	Tenn	Keeping H.	Feb	Consumption	24	Dr Phillips										
22	Collier Wm	6	M	W	/	Tenn	Tenn	Tenn	Druggist	June	Dropsy	6	Dr Rader										
30	Pugh, Peter	41	M	W	/	Tenn	Tenn	Tenn	Appr	Aug	Lung Fever	7	Dr Barker										
37	Kobner James	19	M	W	/	✓Tenn	Tenn	Tenn	Farmer	Nov	Typhoid fever	18	Dr Phillips										
71	Leonard John	73	M	W	/	✓Tenn	Mo	Mo	Farmer	Nov	Typhoid fever	74	Dr Phillips										
101	Walker William	75	M	W	/	Tenn	Mo	Mo	Farmer	Nov	Not known	75	—										
133	Wagner Lucy A	30	F	W	/	Tenn	Tenn	Tenn	March	Nov	Not known	30	Dr Phillips										
157	Warter Henry	79	M	W	/	✓Mo	Mo	Mo	Farmer	May	Dropsy of Heart	52	Dr Phillips										
177	Infant	1	M	W	/	Tenn	Tenn	Tenn	Aug	Not known	Not known	0	Dr Phillips										
174	Broyles Robert S	12	M	W	/	Mo	Ala	Mo	Going to school	July	Typhoid fever	3	Dr Phillips										
184	Broyles L F	25	M	W	/	✓Mo	Ala	Mo	Farmer	Nov	Typhoid fever	5	Dr Phillips										
180	Childs, M. J.	37	M	W	/	Mo	Mo	Mo	Farmer	March	Typhoid fever	0	Dr Phillips										
187	Williams, M. J.	17	M	W	/	Tenn	Tenn	Tenn	Going to school	Sept	Typhoid fever	17	Dr Phillips										
17	Christman, Harin	28	M	W	/	✓Tenn	Tenn	Tenn	Farmer	Nov	Typhoid fever	28	Dr Phillips										
194	Farmer James	15	M	W	/	✓Va	Va	Va	Apprentice	Nov	Typhoid fever	2	Dr Phillips										

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.
	Town. County. State.

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

Number of the line upon which the case is reported above.	Place where the death occurred.
	Town. County. State.

REMARKS.

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, 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

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 DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1 +	Phthisis Pulmonalis		J. H. Phillips	13 +	Typho Malarial		J. H. Phillips	25			
2	Sypho Malarial			14 +	Perforation of bowels			26			
3				15 +	Typhoid Fever			27			
4 +	Typho Malarial			16				28			
5				17				29			
6				18				30			
7				19				31			
8 +	Dropsy of Heart			20				32			
9				21				33			
10 +	Rupture of heart from distension			22				34			
11 +	Typho Malarial			23				35			
12 +	Enteritis from colic			24				36			

Received July 19, 1890.

999

Page No.

Supervisor's Dist: No.

Enumeration Dist: No.

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 15 Civil District, in the County of Lawrence, State of Kansas, J. M. Walker Enumerator.

1.		2.		3.		4.		5.		6.		7.		8.		9.		10.		11.		12.		13.		14.		15.		16.		17.	
Name of the person deceased.		Age at last birthday. If under 1 year, give month in fraction, thus—1 yr. 6 mo. 15 da. If at last birthday, give age in years and months, thus—24 yr. 6 mo.		Sex—Male (M) or Female (F).		Color—White (W), Black (B), Indian (I), Chinese (Ch), Japanese (Jp).		Single (S), Married (M), Widowed (W), Divorced (D).		Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.		Where was the father of this person born? As in column 9.		Where was the mother of this person born? As in column 10.		Profession, Occupation or Trade. (Not to be asked in respect to persons under 10 years of age.)		The month in which the person died.		Disease or cause of death.		Had long a resident of the county? If not, how long? State months and days.		If the disease was not contracted at place of death, state the place.		Name of attending Physician.							
30	Denoble Joseph	72	ch. w.	1						Iowa	Iowa	Iowa																					
44	Wright William	2	ch. w.	1						Iowa	Iowa	Iowa																					
115	Cobb Maggie	4	F. w.	1						Iowa	Iowa	Iowa																					
109	Loundsbach John		ch. w.	1						Iowa	Iowa	Iowa																					
157	King Elizabeth	62	F. w.	1						Iowa		not known																					
157	Walker Mary	63	F. w.	1						Pa		not known																					
224	Johnson Katharine	50	F. w.	1						Pa		Pa																					
254	Paul William	15	ch. B.	1						Iowa	Ch.	Iowa																					
256	Loundsbach John	76	ch. w.	1						Iowa	Pa	Iowa																					

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.

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

Town.

County.

State.

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

Number of the line upon which the case is reported above.

Place where the death occurred.

Town.

County.

State.

REMARKS.

Received July 9 1880.

911

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 4th civil Dist, in the County of Hawkins, State of Tennessee, G. H. Slater Enumerator.

Enumerator.																				
1.	2.	Personal Description.				3.	4.	5.	6.	7.	8.	9.	NATIVITY.		12.	13.	14.	15.	16.	17.
		Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the Father of this person born? (As in column 9.)	Where was the Mother of this person born? (As in column 10.)																
Name of the person deceased.	Age at last birthday. If under 1 year, give months in fractions, thus—4 1/2. If under 6 months, give days in fractions, thus—15 1/2.	Sex—Male (M). Female (F).	Color—White (W). Black (B). Mulatto (C). Red (R). Other (O).	Married.	Divorced.	What was the civil condition of the person who died?	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the Father of this person born? (As in column 9.)	Where was the Mother of this person born? (As in column 10.)	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.	How long a resident of the county? In years, state months in fractions, thus—4 1/2.	If the disease was not contracted in place of death, state the place.	Name of attending Physician.					
50 William Foster	1	M	W	1			Tenn	Tenn	Tenn			May Cholera infant	1		Joseph Walker					
55 Wright Matha	17	F	W	1			Tenn	Tenn	Tenn			Mar Consumption	17		W. L. Britton					
59 Ray William	1	M	W	1			Tenn	Tenn	Tenn			Nov Cause not known	1		None					
79 Foster Clinton	3	M	W	1			Tenn	Tenn	Tenn			May Cholera infant	3		W. L. Britton					
99 Foster Horatio	89	M	W	1			Tenn	Tenn	Tenn			May Rheum. Stomach	89		W. L. Britton					
108 Ripley James E	3	M	W	1			Tenn	Tenn	Tenn			Feb Dropsy Abdo	3		W. L. Britton					
124 Bailey Daniel	57	M	W	1			Tenn	Tenn	Tenn	Farmer	Jan Consumption	0 38			W. L. Britton					
125 Bailey Rachel	1	F	W	1			Tenn	Tenn	Tenn		Feb Spleen	1		(None)						
136 Richards William	2	M	W	1			Tenn	Tenn	W. Va.		Dec Infamaticus	2			W. L. Britton					
171 Myer John R.	70	M	W	1			Tenn	Tenn	Tenn	Farmer	Dec Rheumatism	70			W. L. Britton					
184 Collins Mariah	74	F	W	1			Tenn	Tenn	Tenn		Jan Bronchitis	74			W. L. Britton					
196 Fields Sarah	62	F	W	1			Tenn	Tenn	Tenn		May Bronchitis	62			W. L. Britton					

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.		
	Town.	County.	State.

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

REMARKS.

The attending Physician in cases Number 9, 10, 11 and 12 being absent on professional business therefore could not get his certificate

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, 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

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 DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	Cholera infantum		J. W. McKee	13				25			
2	Consumption		D. J. Hamilton	14				26			
3				15				27			
4	Hemiplegia		H. J. Twiss	16				28			
5	Hemorrhage of the stomach		D. J. Hamilton	17				29			
6	Dropsy abdomen		D. J. Hamilton	18				30			
7	Consumption		D. J. Hamilton	19				31			
8				20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

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, smallpox, &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, 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

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 DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 5 upon which this case is reported	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	<i>Remittent</i>	<i>97</i>		13				25			
2	<i>Coronary</i>	<i>Heart 13. 1/2</i>		14				26			
3				15				27			
4	<i>Coronary</i>	<i>Heart 13. 1/2</i>		16				28			
5				17				29			
6				18				30			
7	<i>Coronary</i>	<i>Heart 13. 1/2</i>		19				31			
8				20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

Page No. 1
Supervisor's Dist. No. 1
Enumeration Dist. No. 19

[7-222.]

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

Note B.—In making entries in columns 9, 7, and 8, an affirmative mark only will be used, thus "D" 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.)

Received July 30, 80

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in *6 District*, in the County of *Lawrence*, State of *Mississippi*, *R. P. Jones*, Enumerator.

Enumerator.																			
Name of the person deceased.		Personal Description.		What was the civil condition of the person who died?		NATIVITY		Profession, Occupation or Trade.		The month in which the person died.		Disease or cause of death.		How long a resident of the county at date of death, state months and years.		If the disease was not contracted in this place, state the place.		Name of attending Physician.	
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.			
1.	John Harris	66	M	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
13	Rowland Sallie	72	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
✓	Francisco Mann	38	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
2	Lynch Mary	23	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
31	Wilton Rachel	66	F	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
34	Joe Schmit	72	M	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
42	Bradley John	26	M	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
43	Lynch Mary	21	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
43	Martha	3	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
58	King Mary	12	F	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
65	Outer Mattie	4	F	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
✓	Lynch Maria	8	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
20	Bradley Lewis	45	M	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
✓	Morrison Ann	65	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
11	Mann Julia	33	F	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
173	Minnae Sallie	88	F	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
✓	Calhoun Lou	72	F	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
✓	Porter William	60	M	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
791	Hicks Jeremiah	69	M	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
20	Francisco Mary	35	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
✓	Lucy	2	F	B	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
285	John Roberts	1	M	H	1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.		
	Town.	County.	State.
22	Jonesboro'	Washington	Tenn

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

REMARKS.

Could not procure statements by attending Physicians, Lines out of the County.

Page No. 1

Supervisor's Dist. No. 1

Enumeration Dist. No. 80

[7-222.]

Received

1602

Note A.—The Census Year begins June 1, 1870, 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 the 11th Civil District in the County of
Hawkins, State of *Tennessee*, *No. 2, A. Stephenson* Enumerator.

Enumerator.																	
Name of the person deceased.		Personal Description.		What was the civil condition of the person who died?		NATIVITY.		Profession, Occupation or Trade.		The month in which the person died.		Disease or cause of death.		How long a resident of the county? (Give years and months, thus—3 (6) for 3 years and 6 months.)		Name of attending Physician.	
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.	
Coatree, John	78 M W	/	Virginia	Virginia	Virginia	Farmer	Febry	Disease not known	3	No Physician							
Coatree, John M	3 M W	/	Tennessee	Tennessee	Virginia	March	Bald	Hives	3	No Physician							
Coatree, John	36 F W	/	Tennessee	Tennessee	Tennessee	June	Disease not known	3	No Physician								
Darter, Stephen	53 M W	/	Tennessee	Virginia	Tennessee	Diviner & Preacher	November	Diphtheria	53	Koffman, Jones & Patton							
Davis, Margaret	40 F W	/	Tennessee	Virginia	Virginia	Domestic in the house	October	Chronic Diarrhoea	40	William L. Moody							
Porter, Henry	60 F W	/	W. Va.	Virginia	Virginia	Domestic in the house	May	Spinal Affection	35	William L. Moody							
Hoff, Thomas	63 M W	/	Virginia	W. Va.	W. Va.	Farmer	August	Chronic Bronchitis	74	William L. Moody							
Bradshaw, Rosannah	20 F W	/	Tennessee	Tenn.	Tenn.	February	Memor-hag of the Throat	20	Wallace, Patton & Moody								
Hibboms, William T.	6 M W	/	Tennessee	Tenn.	Tenn.	December	Bronchitis	6	Jones & Moody								
Green, Amma L.	55 F W	/	Tennessee	Tenn.	Tenn.	Keeping house	September	Chronic Bronchitis	50	Jones & Patton							
Crutz, Philip	35 M W	/	W. Va.	W. Va.	W. Va.	Farmer	May	Bronchitis	74	Jones & Patton							
Crutz, Ann	74 F W	/	Tenn.	W. Va.	W. Va.	Keeping house	September	Bronchitis	74	Jones & Patton							
Richardson, Hugh H.	2 M W	/	Tenn.	Tenn.	W. Va.	November	Chronic Bronchitis	2	Jones & Patton								
Barnett, Sumner	77 F W	/	N.C.	N.C.	N.C.	Keeping house	August	Chronic Rheumatism	40	Koffman							
Hinkhead, David	1 M W	/	Tenn.	Tenn.	Tenn.	May	Engorgement of Throat	1	Jones								
Hineinger, William	2 M W	/	Tenn.	Tenn.	Tenn.	September	Stridula	2	Koffman								
Hineinger, Charley	1 M W	/	Tenn.	Tenn.	Tenn.	January	Stridula	1	Koffman								
Lyons, John	12 M W	/	Tenn.	Tenn.	Tenn.	May	Engorgement of Throat	12	Jones								
Fuller, Joseph B.	68 M W	/	Tenn.	Tenn.	Tenn.	Farmer	February	Chronic Bronchitis	68	Koffman & Dalton							
Young, Elizabeth	60 F W	/	N.C.	N.C.	N.C.	February	Chronic Bronchitis	60	Jones								
Young, David	18 M W	/	Tenn.	Tenn.	W. Va.	February	Chronic Bronchitis	18	Jones								
Young, David	18 M W	/	Tenn.	Tenn.	Tenn.	Keeping house	July	Chronic Bronchitis	71	Jones & Patton							
E. Donnell	71 M W	/	Tenn.	Tenn.	Tenn.	Farmer	July	Chronic Bronchitis	71	Jones & Patton							
For, Lerrish	69 M W	/	Tenn.	Tenn.	Tenn.	Farmer	July	Chronic Bronchitis	69	Jones & Patton							

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

1. 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.

2. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.
Town.	County. State.

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

REMARKS.

Darler, Stephen had been Preaching the Gospel for 20 years in the Missionary Baptist Church.

Page No.

Supervisor's Dist. No.

Enumeration Dist. No. 3

[7-222.]

1003

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 "D" 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 *8 Civil Dist. Newsumville*, in the County of *Hartman*, State of *Tennessee*, *Amul hit*.

1.	2.	3. Personal Description.			6.	7.	8.	9. NATIVITY.			12.	13.	14.	15.	16.	17.
		Age at death.	Sex.	Color.				Place of birth of this person, naming the State or Territory of the U.S., or of foreign birth, if of foreign birth.	Where was the Father of this person born? (As in column 9.)	Where was the Mother of this person born? (As in column 9.)						
107	Baby	2	M	W				Tennessee	Tenn.	Tenn.						
120	Arnold Louisa E	12	F	W				Hartman, Tenn.	Tenn.	Tenn.		April				
129	Hickley Eliza A	24	F	W				Hartman, Tenn.	Tenn.	Tenn.		April				
129	Holly, W. H.	12	F	W				Hartman, Tenn.	Tenn.	W. A.		Jan				
180	Lyons David	60	M	B				Hartman, Tenn.	Tenn.	Tenn.	Laborer	April	Consumption	0	60	
180	Lyons James S.	21	M	W				Hartman, Tenn.	Tenn.	Tenn.	Farmer	Feb.	Consumption	0	21	
210	Chandlers Mary	62	F	W				Hartman, Tenn.	W. A.	W. A.	W. Occupation	Mar.	Consumption	0	62	
219	Jenkins Charlotte	18	F	W				Hartman, Tenn.	Tenn.	Tenn.	W. Occupation	Mar.	Consumption	0	18	
237	Shears Landon	8	M	W				Hartman, Tenn.	Tenn.	Tenn.		Sept.	Consumption	0	8	
242	Hickfult Judy S.	7	M	W				Hartman, Tenn.	Tenn.	Tenn.		Sept.	Consumption	0	7	
242	Barret John W.	3	M	W				Hartman, Tenn.	Tenn.	W. A.		Oct.	Consumption	0	3	
270	Miller Joseph	40	M	W				Hartman, Tenn.	Tenn.	Tenn.	Farmer	May	Consumption	0	40	
273	Prasley Sarah F.	1	F	W				Hartman, Tenn.	Tenn.	Tenn.		Oct.	Consumption	0	1	
278	Harlan Henry	74	M	W				Hartman, Tenn.	Tenn.	Tenn.	Farmer	May	Pneumonia	74		

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.		
	Town.	County.	State.
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			

REMARKS.

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, 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

Number of the line upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	<i>Infant of Chest</i>		<i>D. C. Targum</i>	13				25			
2	<i>Pneumonia</i>		<i>D. C. Targum</i>	14				26			
3				15				27			
4				16				28			
5				17				29			
6				18				30			
7				19				31			
8				20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

received July 1, 1880.

Page No. 1
Supervisor's Dist. No. 4
Enumeration Dist. No. 82

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 Dist. (Hatterson) in the County of Hawkins, State of Tennessee, Newton J. Beal

1.	2.	3.			6.	7.	8.	9.			12.	13.	14.	15.	16.	17.
		Age at last birthday, if under 1 year, state month and day in fraction.	Sex	Color		Single		Place of birth of this person, naming the State or Territory, of the U. S., or the country, (For foreign birth, give foreign birth.)	Where was the Father of this person born? As in column 9.	Where was the Mother of this person born? As in column 10.						
51	Gidson Mary	52	F	W	/			North Carolina	North Carolina	North Carolina	Keeping house	Apr	Dropsey	24		D. C. Ferguson
52	Barrett Rebecca	27	F	W	/			Tennessee	Tennessee	Tennessee	Keeping house	Nov	Dropsey	27		J. Hoffman
53	Clinton	3	M	W	/			Tennessee	Tennessee	Tennessee	At home	Oct	Dropsey	28		J. Hoffman
54	Bean Michael	4	M	W	/			Tennessee	Tennessee	Tennessee	At home	April	Dropsey	24		J. Hoffman
55	Anderson Matilda	72	F	W	/			Tennessee	Tennessee	Tennessee	At home	Feb	Dropsey	24		J. Hoffman
56	Kincaid Samuel A	70	M	W	/			Tennessee	Tennessee	Tennessee	At home	Feb	Dropsey	24		J. Hoffman
57	Gillen James W	6	M	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
58	Simmons Elizabeth	39	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
59	Carmack Ida	73	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
60	Lucy Harris	64	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
61	Lucy Harris	5 1/2	F	B	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
62	Lucy Harris	M	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
63	Lucy Harris	30	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
64	Lucy Harris	38	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
65	Lucy Harris	84	F	W	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman
66	Lucy Harris	17	F	B	/			Tennessee	Tennessee	Tennessee	At home	Dec	Dropsey	24		J. Hoffman

Note E.—Upon this Schedule should be CAREFULLY RETURNED.				Of the deaths reported above, the following occurred in this enumeration district, but the families to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:				Of the deaths reported above, the following occurred out of this enumeration district, though the families to which the deceased belonged, resided June 1, 1880, in this enumeration district, as follows:			
1st. 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.	3d. 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 can 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 age that can be given is 25 years.	4th. The families to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:	5th. The families to which the deceased belonged, resided June 1, 1880, in this enumeration district, as follows:	6th. The families to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:	7th. The families to which the deceased belonged, resided June 1, 1880, in this enumeration district, as follows:	8th. The families to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:	9th. The families to which the deceased belonged, resided June 1, 1880, in this enumeration district, as follows:	10th. The families to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:	11th. The families to which the deceased belonged, resided June 1, 1880, in this enumeration district, as follows:	12th. The families to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:

REMARKS.

July 26, 1880. One still-birth occurred July 1st, 1880, cause supposed to be over-work.
No 73 One still-birth occurred August 27, 1880, cause supposed to be trouble.

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, ulcer, specify the organ or part affected, as *ilic 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

Number of the line on Schedule upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	<i>Ac. Bronch. of trach.</i>	<i>emp.</i>	<i>Dr. Hargens</i>	13				25			
2	<i>Ac. Bronch. of trach.</i>		<i>Dr. Hargens</i>	14				26			
3	<i>Ac. Bronch. of trach.</i>		<i>Dr. Hargens</i>	15				27			
4				16				28			
5				17				29			
6				18				30			
7				19				31			
8				20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

Supervisor's Dist: No. 10

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, "X" 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 Han Lins, State of Mississippi, (Chas. H. Aldenwater), in the County of Jefferson.

Name of the person deceased.	Age at death.	Sex.	Married.	Divorced.	Place of birth of this person, naming the State or Territory of the U.S., or of foreign birth.	Where was the Father of this person born? As in column 9.	Where was the Mother of this person born? As in column 10.	Profession, Occupation or Trade.	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.	Name of attending Physician.
Carl Bragler	34	M	X		Germany							
Lillie	3	F	X		Germany							
John Hargrave	13	M	X		Germany							
John Lutz	16	M	X		Germany							
Will Miller	2	M	X		Germany							
Virginia Gads	63	F	X		Germany							
Samuel	22	M	X		Germany							
Edgar	66	M	X		Germany							
Martha	18	F	X		Germany							
George	16	M	X		Germany							
Richard Dobbin	44	M	X		Germany							
D. Reed	"	"	X		Germany							
M. Reed	"	"	X		Germany							
My. Mannis	"	"	X		Germany							

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.

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

Town. County. State.

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

Number of the line upon which the case is reported above.

Place where the death occurred.

Town. County. State.

REMARKS.

Have 3 more deaths only at Mr. Pinkney. Also one at Charles Brown one at Single born dead.

I want to make a few remarks with regard to these deaths. Perkins has moved from the neighborhood about 12 or 15 miles. I did not see him. The disease is placed correctly. Mr. McKelley lives some 10 miles over the hill and away, but still I have his word for the disease that has been given in under the name of this disease. Thus I will have this fixed correctly.

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, ulcer, specify the organ or part affected, as *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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

Number of the line upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	Leucorrhoea		Dr. J. C. Williams	13				25			
2	Botch		Dr. J. C. Williams	14				26			
3	Child Birth			15				27			
4	Scarlet Fever		Dr. J. C. Williams	16				28			
5	Scarlet			17				29			
6	Measles		Dr. J. C. Williams	18				30			
7	Scarlet Fever		Dr. J. C. Williams	19				31			
8	Croup		Dr. J. C. Williams	20				32			
9				21				33			
10				22				34			
11			Dr. J. C. Williams	23				35			
12			Dr. J. C. Williams	24				36			

Enumeration Dist: No.

Note A.—The Census Year begins June 1, 1880, 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.*)

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 2^d 13th Districts, in the County of Hawkins, State of Tennessee. Geo. A. Murray

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

1st. 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

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 can 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 age that can be given is 25 years.

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

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

Number of the line upon which the case is reported above.

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

Town. County. State.

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

In the 5th Enumeration

Distrik

1st Supervisors District of Tennessee

REMARKS

REMARKS.
Wren Larvae, and lived about three weeks after the death of the mother.

It would take 3 or 4 days, to get Doctors' Certificates, as only one lives in my Enumeration Districts, the others living north & south from ten to fifteen miles, from Districts. And as they have all sent the list of persons who died during the Census year, the diseases &c. to the Superintendent of Census themselves, by looking at the above Physicians' Reports, they will no doubt correspond -

Page No.

Supervisor's Dist. No.

Enumeration Dist. No. 85

[7-222.]

Received July 19, 1880.

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 11th Civil District, in the County of Hawkins, State of Tennessee, George W Brooks Enumerator.

1.	2.	3. Personal Description.							4. NATIVITY.			12.	13.	14.	15.	16.	17.
		Age at last birthday, or under 1 year, give day in fraction.	Sex—Male (M) Female (F)	Color—White (W), Black (B), Indian (I), Chinese (C), Japanese (J).	Married (M) Single (S) Widowed (W) Divorced (D)	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the Father of this person born? (As in column 9.)	Where was the Mother of this person born? (As in column 10.)	Profession, Occupation or Trade.	The month in which the person died.	Disease or cause of death.						
144	Infant Webb	80 m w				Tennessee Tenn	Tenn	Tenn		Dec							
152	Infant Hamblen	80 m w				Tennessee Tenn	Tenn	Tenn		Feb							
155	Hamblen Joseph	51 m w				Tennessee Tenn	Tenn	Tenn	Farmer	June	Chronic Rheumatism						
161	Reed Pleasant	63 m w				Tennessee Tenn	Tenn	Tenn	Farmer	June	Consumption						
214	Infant Price	80 m w				Tennessee Tenn	Tenn	Tenn									
Additions to Sullivan Co from Supplemental Schedules																	
Broekner John	52 m w					Virginia	3 ^d Tenn E.D. No 40				For Rheumatism						
Crush Brooks	89 m w					North Carolina	5 th Virginia E.D. No 40				Felix Dropsy						
Criskey Elyse H	24 f w					Tenn	1 st Tenn E.D. No 81				Jan'y Typhoid Fever						
Hilly (H. W.)	72 f w					Tenn	1 st Tenn E.D. No 81				Jan'y No dia						
Chambers Mary J.	56 f w					North Carolina	5 th Virginia E.D. No 38				Wch Consumption						
Hard Columbus	2 m w					Tenn	1 st Tenn E.D. No 91				Aug Croup						

Upon this Schedule should be CAREFULLY RETURNED.

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

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.

Every death should make these entries upon this Schedule with every source of information. When a positive statement is made, as when an age can only be estimated, or a date is conjectured, the entry may be inclosed in parentheses, meaning that the best estimate of the age that can be given is intended.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.		
	Town.	County.	State.
✓ 1		Hawkins	Tenn
✓ 2		Hawkins	Tenn
✓ 3		Hawkins	Tenn
✓ 4		Hawkins	Tenn

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

REMARKS.

Received July 19, 1880.

Page No. 1
Supervisor's Dist. No. 1
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, 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 book of this Schedule.
Note D.—In column 17, note distinctly if no Physician was in attendance, thus (None).

1008

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Fourth Civil District, in the County of Hawkins, State of Tennessee, Geo. B. White Enumerator.

Name of the person deceased.																
Personal Description.																
What was the civil condition of the person who died?																
NATIVITY.																
Profession, Occupation or Trade.																
The month in which the person died.																
Disease or cause of death.																
How long a resident of the county? If less than 1 year, state months in fractions.																
If the disease was not contracted at place of death, state the place.																
Name of attending Physician.																
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
2	Joseph Frederic	3	M	W	1			Tennessee	Tennessee	Tennessee	Nov	Hives	0 3			Dr. McConkle
13	Lock, Eliza	19	F	W	1			Tennessee	Tennessee	Tennessee	Keeping house	Feb	Consumption	0 1		Dr. McConkle
23	Rufus Shady	32	M	W	1			Tennessee	Tennessee	Tennessee	Scarf fur, Stov	Dec	Scarlet fever	0 1		Dr. McConkle
29	Wm. B. B.	42	M	W	1			Tennessee	Tennessee	Tennessee	Nov	Scarlet fever	0 1			Dr. McConkle
31	Hyl. Joseph C.	42	M	W	1			Tennessee	Tennessee	Tennessee	Day labor	Jan	Consumption	0 6		
32	Hyl. Horace	19	M	W	1			Tennessee	Tennessee	Tennessee	Day labor	Jan	Consumption	0 6		
32	Mary	42	F	W	1			Tennessee	Tennessee	Tennessee	Aug			0		
30	Mufford Taliza	20	F	W	1			Tennessee	Tennessee	Tennessee	Keeping house	Feb	Consumption	0 20		
45	Simpson Eliza	30	F	W	1			Tennessee	Tennessee	Tennessee	Day labor	Feb	Shot	0 20		
48	Praso, A. B.	68	F	W	1			Virginia	Virginia	Virginia	Keeping house	Aug	Cancer	0 13		Dr. Livingston
48	Praso, A. B.	23	F	W	1			Tennessee	St. C.	St. C.	Keeping house	May	Child bed fever	0 23		Dr. McConkle
52	Washington Helen	20	F	W	1			Virginia	Virginia	Virginia	Apr	Pyrexia	0 13			Dr. Johnson
54	B. B. B.	22	F	W	1			Tennessee	Tennessee	Tennessee	Keeping house	May	Pyrexia	0 13		Dr. McConkle
54	B. B. B.	42	M	W	1			Tennessee	Tennessee	Tennessee	May			0		
54	B. B. B.	8	M	W	1			Tennessee	Virginia	Virginia	May	Pyrexia	0 13			Dr. McConkle
54	B. B. B.	6	F	W	1			Tennessee	Virginia	Virginia	Apr	Pyrexia	0 13			Dr. McConkle
54	B. B. B.	20	F	W	1			Tennessee	W. C.	Tennessee	Jan		0 20			
54	B. B. B.	30	F	W	1			Tennessee	Tennessee	Tennessee	May	Consumption	0 30			Dr. McConkle
42	Blissie Linda	40	F	W	1			Tennessee	Tennessee	Tennessee	Keeping house	Nov	Consumption	0 40		Dr. Johnson
48	Rogers, Emily	40	F	W	1			Tennessee	Tennessee	Tennessee	Keeping house	Apr		0 6		
49	Williamus Julia	72	M	W	1			Tennessee	Tennessee	Tennessee	Feb	Hives	0 22			Dr. McConkle
109	— Baby	1	F	W	1			Tennessee	Tennessee	Tennessee	May			0 9		Dr. McConkle
116	Shadrach Etter	1	F	W	1			Tennessee	Tennessee	Tennessee	Feb	Pyrexia	0 9			Dr. McConkle
119	Shadrach Baby	1	F	W	1			Tennessee	Tennessee	Tennessee	May			0 9		Dr. McConkle
123	St. C. Mary	76	F	W	1			Virginia	Virginia	Virginia	Jan	Pyrexia	0 16			Dr. Johnson
144	Kingor, James	67	M	W	1			Ark. Calusa	W. C.	W. C.	Jan	Pyrexia	0 16			Whitcomb Dr. Hacker
146	McMurtre, Anna	25	F	W	1			Tennessee	Tennessee	Tennessee	Keeping house	May	Consumption	0 7		Dr. Johnson
162	Johnson, David	87	M	W	1			Tennessee	Tennessee	Tennessee	Dec	Pyrexia	0 57			Dr. McConkle
171	Shadrach Baby	20	F	W	1			Tennessee	Tennessee	Tennessee	March			0		Dr. Johnson
209	Proffit, John	52	M	W	1			Virginia	Virginia	Virginia	Jan		Consumption	0 73		Dr. Johnson
219	Etter, Hannah	22	F	W	1			Tennessee	Tennessee	Tennessee	May	Consumption	0 22			Dr. Johnson
—	— Wilson	42	M	W	1			Tennessee	Tennessee	Tennessee	May	Consumption	0 2			Dr. Johnson
—	— James	21	M	W	1			Tennessee	Tennessee	Tennessee	March	Consumption	0 4			Dr. McConkle
—	— Charlie	72	M	W	1			Tennessee	Tennessee	Tennessee	March			0		
—	— Long, James	24	M	W	1			Tennessee	Tennessee	Tennessee	May	Pyrexia	0 3			Dr. McConkle
—	— Proffit, David	3	F	W	1			Tennessee	Tennessee	Tennessee	May	Scarlet fever	0 8			Dr. Johnson
122	Proffit, Willie	7	M	W	1			Tennessee	Tennessee	Tennessee	Apr	Consumption	0 7			

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

1st. 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 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 can 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 age that can be given is 25 years.

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.
Town.	County.
State.	

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

Number of the line upon which the case is reported above.	Place where the death occurred.
Town.	County.
State.	

REMARKS.

Enumeration Dist: No.

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

Enumerator.

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 can 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 age that can be given is 25 years.

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.

[illegible]

REMARKS.

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, 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. 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 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 throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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.

Form for the statement by attending physicians of the causes of death in the cases reported on the reverse side of this sheet.

Number of the line on which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1				13	Not Attending Physician	J. R. Walker		25	Chronic Complication	J. R. Walker	
2	Correctly Stated		J. R. Walker	14	Do not remember	J. R. Walker		26	Chronic Complication	J. R. Walker	
3				15	Chronic Complication	J. R. Walker		27	Correctly Stated	J. R. Walker	
4	Correctly Stated		R. P. M. L. L.	16				28	Chronic Complication	J. R. Walker	
5	Correctly Stated		J. R. Walker	17				29	Measles	J. R. Walker	
6	Correctly Stated		J. R. Walker	18				30	Correctly Stated	J. R. Walker	
7				19	Chronic Complication	J. R. Walker		31			
8				20	Correctly Stated	J. R. Walker		32	Correctly Stated	J. R. Walker	
9				21	Correctly Stated	J. R. Walker		33			
10				22	Correctly Stated	J. R. Walker		34	Chronic Complication	J. R. Walker	
11				23	Correctly Stated	J. R. Walker		35	Correctly Stated	J. R. Walker	
12				24				36	Chronic Complication	J. R. Walker	