

Received Sept 10, 1880

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Supervisor's Dist. No. 4

Enumeration Dist. No. 80

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 80 Dist, in the County of Monroe, State of Georgia, W. G. Lenth Enumerator.

1	2	3	4				5			6			7			8			9			10			11			12			13			14			15			16			17		
			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? How long a resident of the State? State month in which deceased.			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																													
1	Mary A. Henshaws	28	F	W	1			Kentucky	W. G.	W. G.	Housekeeper	March	Dysentery	Memphis	3	J. B. Brasmell																													
2	V. H. Henshaws	4	F	W				Tennessee	W. G.	Texas	Domestic	February			4	J. C. McSwain																													
3	Mrs. J. Henshaws	4	F	W				Tennessee	W. G.	Texas	Feb	Grave		5	J. B. Brasmell																														
4	Littell W. P.	1	M	W	1			Tennessee	W. G.	Texas	March	Brain fever		4	Alexander L.																														
5	Bayler M.	30	F	W	1			Texas	W. G.	Texas	Feb	Apoplexy		30	Wm. B. Bunt																														
6	Jackson Henshaws	32	F	W	1			Miss	W. G.	Texas	Housekeeper	March	Consumption		40	Brasmell J. B.																													
7	W. Henshaws	3	M	W	1			Texas	W. G.	Texas	March	Grave		3	Wm. B. Bunt																														
8	W. Henshaws	11	F	W				Texas	W. G.	Texas	April	Enteritis				Wm. B. Bunt																													
9	W. Henshaws	80	M	W				Texas	W. G.	Texas	Aug	Kidney duft				"																													
10	W. Henshaws	82	F	W				Texas	W. G.	Texas	Oct	Emphysema				"																													
11	W. Henshaws	97	F	W				Texas	W. G.	Texas	Feb	Scarlet fever				E. C. Sherman																													
12	W. Henshaws	75	F	W				Texas	W. G.	Texas	Aug	Cholera duft				J. A. McSwain																													
13	W. Henshaws	36	M	W				Texas	W. G.	Texas	July	Malaria				S. A. Edwards																													
14	W. Henshaws	30	F	W	1			Texas	W. G.	Texas	Oct	Cancer				Wm. B. Bunt																													
15	W. Henshaws	19	M	W				Texas	W. G.	Texas	May					E. B. Bunt																													
16																																													
17																																													
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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:

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:

Place where the death occurred.		
Town.	County.	State.

REMARKS.

No Physicians found having moved to another part of the country consequently I could not get their signatures
 Thomas Lenth Enumerator

Enumeration Dist: No.

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

Henry, State of Tennessee, Jas M. Gilbert

Paris

Note E—Upon this Schedule should be CAREFULLY RETURNED:

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 cannot be estimated, or a birth-place must be conjectured, the entry may be inclosed in parentheses; thus: Age (35), meaning that the best estimate of the age that can be given is 35 years.

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:

[illegible]

REMARKS

Pneumonia is our most prevalent & fatal disease. Consumption is gaining more & yearly especially amongst the negroes of F. F. Potter M.D.

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 hip; 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—~~intemperance~~, 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 trunk.

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	Correct		S. C. Edmunds
2	Correct		S. C. Edmunds	14				26	Correct		S. C. Edmunds
3				15				27			
4	Phthisis Pulmonalis		S. C. Edmunds	16				28			
5				17				29	Correct		S. C. Edmunds
6	Correct		S. C. Edmunds	18	Correct		S. C. Edmunds	30	Correct		S. C. Edmunds
7	Phthisis		F. J. Potter	19	Correct		F. J. Potter	31			
8	Correct		S. C. Edmunds	20	Correct		S. C. Edmunds	32			
9				21	Correct		S. C. Edmunds	33	Correct		S. C. Edmunds
10	Sci.			22				34			
11				23				35	Correct		S. C. Edmunds
12	Correct		S. C. Edmunds	24				36	Correct		F. J. Potter

Supervisor's Dist: No. 4
Enumeration Dist: No. 68

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).

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King, State of Missouri, John W. Gilbert

Enumerator

Name of the person deceased.			Personal Description.		What was the civil condition of the person who died?			NATIVITY.	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was this person born? As in column 9.	Where was the mother of this person born? As in column 9.	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.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
1	Jonesley J B	67 M W	✓	✓	VA	va	va	Farmer	Sept	Material Injury		Dr Edmunds				
2	Rainey Venice	6 F W	✓	✓	Tenn											
3	Coughlin M E	32 F W	✓	✓				Helping House	Dec	Heart disease		Dr J. G. Conroy				
4	Atkins Ann	40 F B	✓	✓					May	Consumption		None				
5	Harris Infants	2 B	✓	✓					Dec	Consumption		None				
6	Jennings Charles	17 M B	✓	✓					Feb	Pneumonia		Dr Coram				
7	Matter	10 F B	✓	✓					Sept	Heart Disease						
8	Alexander Lucy	13 F B	✓	✓					Oct	Pneumonia		Dr Matthews				
9	Hicks Susan	60 F W	✓	✓					Feb	Pneumonia		Dr Porter				
10	Porter Henry	13 M B	✓	✓					Nov	Dysentery		Dr Porter				
11	Standerant Nellie	1/2 F W	✓	✓					Jan	Erysipelas		Dr Porter				
12	Loring Alex	29 M W	✓	✓				Farmer	Sept	Typhoid Fever		Edmund & Robt				
13	Brown Rachael	24 F B	✓	✓				Labors	man	Pneumonia		Dr Coram				
14	Bruce Mattie	10 F B	✓	✓				"	May	Consumption		Dr Coram				
15	Norton Eliza	57 F W	✓	✓				"	Feb	Pneumonia		" "				
16	Niel James	2 M B	✓	✓					Dec	Fife		Dr Porter				
17	Biles Henry	17 M B	✓	✓				"	Nov	Typhoid Fever		Dr Porter				
18	Wanau	8 M B	✓	✓				"	"	"		" "				
19	Price Letta	1/2 F B	✓	✓					July	Pericula		Dr Edmund				
20	Carroll Infant	1/2 M B	✓	✓					Jan	Filox		Dr Coram				
21	✓ Palmer Jefferson	10 M B	✓	✓				Labors	April	Stiff Arm		Dr Edmund				
22	Brown Infant	1 M B	✓	✓					Dec	Consumption		"				
23	son		✓	✓				Farmer	May	Heart Disease		Dr Edmund				
24	✓ Anderson Robert	67 M W	✓	✓				Labors	April	Pneumonia		Dr Porter				
25	Dumas Emily	28 F B	✓	✓				"	June	Drowned		J. J. Davis				
26	✓ Williams Cain	19 M B	✓	✓				"	Nov	Material Injury		Dr Matthews				
27	Dumson Anna	20 F W	✓	✓				Feb	Still Born			Dr Coram				
28	Dumas Infant	1 F B	✓	✓				Nov	disease unknown			Dr Edmund				
29	Allen Infant	4 M B	✓	✓				Labors	April	Consumption		Dr Edmund				
30	✓ Evans Dan	24 M B	✓	✓				"	June	Still Born		Dr Coram				
31	Smith Infant	0 F B	✓	✓				Labors	Sept	Consumption		None				
32	Martin Mary	60 F B	✓	✓				"	Aug	Heart disease		None				
33	Atkins Charles	10 F B	✓	✓				Labors	Feb	Typhoid Fever		Dr Coram				
34	Rale Jacob	10 M B	✓	✓				mantua maker	May	Pneumonia		Dr Edmund				
35	✓ Jordan Charles	35 F W	✓	✓				child	Stiff Arm			Dr Coram				
36	Wilson Infant	0 M W	✓	✓				brook	Nov	Phthisis Pul		Dr Edmund				
37	✓ Carson Anna	32 F B	✓	✓				Nov	Sept	Typhoid Fever						
38	Blanton Matthe	24 F W	✓	✓												

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[illegible]

REMARKS.

Pneumonia is the most prevalent & fatal disease we have. Consumption is growing more prevalent yearly especially amongst the negroes. Of 5 Whites and 4 colored certify the deaths in P. Dist in King county Tennessee in the last 12 months ending June 1st 1886 is all told 42 from the best information I can get. J. M. Gilbert
August 1886

INSTRUCTIONS.

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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.

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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 this line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of this line on Schedule 5 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of this 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	Heart		J. B. Ed.	13				25			
2				14				26			
3				15				27			
4				16				28			
5				17	Correct		J. F. Porter	29			
6				18				30	Heart		J. B. Ed.
7				19	Heart		J. B. Ed.	31			
8				20				32			
9	Pneumonia		J. F. Porter	21	Heart		J. B. Ed.	33			
10				22				34			
11	Correct		J. F. Porter	23				35	Heart		J. B. Ed.
12	Heart		J. B. Ed.	24	Anginal attacks		J. B. Ed.	36			

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 *District 69* **in the County of** *Henry* **, State of** *Tennessee*

Enumerator.

1.	2.	3. Personal Description.			7. What was the civil condition of the person who died?	8. Divorced D.	9. NATIVITY			12. Profession, Occupation or Trade.	13. The month in which the person died.	14. Disease or cause of death.	15. How long a resident of the county? If less than six months, state month in which deceased.	16. If the disease was not contagious, place of death, state the place.	17. Name of attending Physician.
		Age at death.	Sex.	Color.			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.						
1	25	1	M	W			Tenn	Tenn	Tenn	Farmer	July	Dysentery			John A. Wilson
2	31	1	M	W			Tenn	Tenn	Tenn	Farmer	May	Pneumonia			John A. Wilson
3	47	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
4	39	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
5	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
6	67	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
7	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
8	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
9	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
10	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
11	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
12	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
13	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
14	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
15	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
16	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
17	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
18	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
19	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
20	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
21	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
22	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
23	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
24	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
25	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
26	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
27	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
28	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
29	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
30	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
31	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
32	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
33	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
34	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
35	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
36	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
37	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
38	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
39	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
40	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
41	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
42	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
43	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
44	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
45	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
46	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
47	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
48	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
49	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
50	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
51	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
52	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
53	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
54	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
55	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
56	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
57	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
58	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
59	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
60	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
61	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
62	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
63	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
64	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
65	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
66	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
67	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
68	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
69	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
70	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
71	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
72	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
73	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
74	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
75	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
76	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
77	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
78	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
79	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
80	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
81	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
82	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
83	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
84	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
85	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
86	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
87	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
88	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
89	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
90	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
91	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
92	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
93	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
94	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
95	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
96	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
97	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
98	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
99	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson
100	27	1	M	W			Tenn	Tenn	Tenn	Farmer	Oct	Pneumonia			John A. Wilson

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 (35), 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.
24			
25			

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.
24			
25			

REMARKS.

Pneumonia was more prevalent the past winter than usual, also Smallpox. The nature of mortality a little greater than usual in both of these diseases.

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	Correctly Stated		John T. Linton	13	Correctly Stated		John T. Linton	25			
2	Do		Do	14			John T. Linton	26			
3	Do		Do	15			John T. Linton	27			
4				16			John T. Linton	28			
5	Correctly Stated		John T. Linton	17			John T. Linton	29			
6			Do	18			John T. Linton	30			
7			Do	19			John T. Linton	31			
8			Do	20			John T. Linton	32			
9			Do	21				33			
10			Do	22				34			
11			Do	23				35			
12			Do	24				36			

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 6 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 6 upon which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on Schedule 6 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				26			
3				15				27			
4	Rosewell, Sam		J. H. McKim	16				28			
5	"		"	17				29			
6	"		J. H. McKim	18				30			
7	"		"	19				31			
8	"		J. H. McKim	20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

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, 1, 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), the 3rd column of the

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 70th District, in the County of

Henry, State of Tennessee, J. P. Clark

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 a year, state month in the year.		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.						
Jackson Rachel	16	F	B	1	Tenn	Virginia	Tenn	at home	June	Dysentery	1	J. W. Wilson										
Warding Euphonia	13	F	W	1	Ky	Ky	Tenn	at school	Apr	Cholera	1	J. G. Starks										
White Wannie	12	F	B	1	Tenn	W. Va	W. Va	at home	Apr	Spasmodic	1	None										
Warding Nancy	33	F	W	1	Tenn	W. Va	W. Va	at home	June	Zyloid fever	32	Ceram & Potts										
Elizabeth Pleasant	6	M	W	1	Tenn	W. Va	W. Va	at home	June	Kicked by horse	6	Alexander										
Rose Charles	8	M	W	1	Tenn	Tenn	Tenn	at home	May	Measles	8	J. G. Starks										
Ward Mary	74	F	W	1	Tenn	Tenn	Tenn	at home	Sept	Spasmodic	711	J. G. Starks										
Harpe	30	M	W	1	Tenn	Tenn	Tenn	at home	Aug	Spasmodic	30	J. G. Starks										
Wardford Martha	56	F	W	1	Tenn	Tenn	Tenn	at home	April	Zyloid fever	54	J. G. Starks										
Norby Lucy	50	F	B	1	Tenn	Tenn	Tenn	at home	Aug	Spasmodic	15	J. G. Starks										
Richard Edward	1	M	W	1	Tenn	Tenn	Tenn	at home	Apr	Measles	1	J. G. Starks										
Ward Martha	17	F	W	1	Tenn	Tenn	Tenn	at home	June	Zyloid fever	3	J. G. Starks										
Sarah	43	F	W	1	Tenn	Tenn	Tenn	at home	June	Spasmodic	43	J. G. Starks										
John B.	14	M	W	1	Tenn	Tenn	Tenn	at home	June	Zyloid fever	3	J. G. Starks										
Ellison Albert J.	25	M	W	1	Ky	Ky	Ky	at home	June	Spasmodic	25	J. G. Starks										
Jones Othello	6	F	W	1	Tenn	W. Va	W. Va	at home	Sept	Spasmodic	6	J. G. Starks										
Ward Maudy	3	F	W	1	Tenn	Ky	Ky	at home	Aug	Spasmodic	3	J. G. Starks										
Ward Robert	53	M	W	1	Virginia	W. Va	W. Va	at home	Sept	Spasmodic	44	J. G. Starks										
Olive	30	F	W	1	Tenn	Tenn	Tenn	at home	Apr	Spasmodic	30	J. G. Starks										
Ward Mary	1	F	W	1	Tenn	Tenn	Tenn	at home	June	Spasmodic	1	J. G. Starks										
Wardford Thomas	74	M	W	1	Tenn	Tenn	Tenn	at home	Oct	Zyloid fever	74	J. G. Starks										
Love	51	F	W	1	Tenn	Tenn	Tenn	at home	Oct	Measles	51	J. G. Starks										
Olive	51	F	W	1	Tenn	Tenn	Tenn	at home	March	Still Birth	0	J. G. Starks										
Ellison	56	M	W	1	Tenn	Tenn	Tenn	at home	Jan	Still Birth	0	J. G. Starks										
Ray Annie	8	F	W	1	"	"	"	at home	Oct	Still Birth	0	"										
Ward Mary	3	F	W	1	"	"	"	at home	July	"	0	"										

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

Some of the deaths recorded above have not the signature of attending Physician, the Physician not living at this time in my district.

J. P. Clark
Enumerator

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 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	Too Early Exposure after Child birth	Typhoid	J. C. Willson	13	Chronic Bronchitis	Congestion	J. L. Stark	25			
2	Pneumonia	Congestion	J. L. Stark	14	Typhoid Pneumonia		J. L. Stark	26			
3				15	Typhoid Pneumonia	Congestion	J. L. Stark	27			
4				16				28			
5				17	Chronic Meningitis		J. L. Stark	29			
6	Meningitis		J. L. Stark	18	Bilious Colic	Congestion	J. L. Stark	30			
7	Tuberculosis	Pneumonia	J. L. Stark	19				31			
8	"Pulmonalis"		J. L. Stark	20				32			
9				21	Typhoid Fever		J. L. Stark	33			
10				22	Chronic Bronchitis		J. L. Stark	34			
11				23	Still Birth		J. L. Stark	35			
12	Typhoid Pneumonia	Congestion	J. L. Stark	24	Still Birth		J. L. Stark	36			

Page No.

Supervisor's Dist: No. 4

Enumeration Dist: No. 21

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 Henry, State of Minnesota, in the County of St. Louis.

1.	2.	3. Name of the person deceased.			4. Personal Description.			5. What was the civil condition of the person who died?			6. NATIVITY.			7. Profession, Occupation or Trade.			8. The month in which the person died.			9. Disease or cause of death.			10. How long a resident of the county? If not a resident of the county, state month in which first arrived in county.			11. If the disease was not contracted at place of death, state the place.			12. Name of attending Physician.		
1.	✓	J. B. Fowler			60	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
2.	✓	Ella M. Swaine			4	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
3.	✓	Martin Krichard			30	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
4.	✓	Vilky Linjers			18	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
5.	✓	Peder M. Eke			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
6.	✓	Cath. Hansen			20	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
7.	✓	J. Ellis Wilson			25	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
8.	✓	Malcolm Callaway			30	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
9.	✓	J. H. B. Chas. C. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
10.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
11.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
12.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
13.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
14.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
15.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
16.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
17.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
18.	✓	J. A. B. B. 3			3	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
19.	✓	James Byars			20	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
20.	✓	Vina Griffin			18	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
21.	✓	Vina Griffin			25	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								
22.	✓	Vina Griffin			1/4	W	or	Single	/		Swedish			Swedish			Sept			Apoplexy			10								

Note E.—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 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	Typhoid Fever	Hemorrhage	J. A. M. Lewis	13				25			
2	Diphtheria	Asphyxia	J. A. M. Lewis	14	Consumption		J. A. M. Lewis	26			
3	Consumption		J. A. M. Lewis	15	Consumption		J. A. M. Lewis	27			
4	Abscess of Abdomen		J. A. M. Lewis	16	Consumption		J. A. M. Lewis	28			
5	Diphtheria		J. A. M. Lewis	17				29			
6	Phthisis		None	18				30			
7	Typhoid Fever	Uremia	J. A. M. Lewis	19				31			
8	Consumption		J. A. M. Lewis	20				32			
9	Phthisis	Hemorrhage	None	21				33			
10	Consumption		J. A. M. Lewis	22				34			
11	Consumption		J. A. M. Lewis	23				35			
12	Phthisis		J. A. M. Lewis	24				36			

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 entered, is to be marked as follows: D.

case of Divorced persons, column 8, when the letter "D" is to be used.

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 72 List, in the County of Henry, State of Tennessee, W. H. Lewis

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:

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

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

Number of the line upon which the case is reported

Place where the death occurred.

Town.

County,

State

• **Thyroid**

1

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 (35), meaning that the best estimate of the age that can be given is 25 years.

REMARKS

The Physician in any District seen & their Cases reported.

Received Sept. 10, 1880

Page No. 2
 Supervisor's Dist. No. 42
 Enumeration Dist. No. 42

Received Sept. 10, 1880

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.)

1054

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 72 dist, in the County of Hennepin, State of Minnesota

Enumerator.

Name of the person deceased.		Age at last birthday, if under 1 year, give months in fractions, thus—11 mo. 15 da. If 1 year or over, give years and months in fractions, thus—1 yr. 6 mo. 15 da.	Sex—Male (M) or Female (F).	Color—White (W), Black (B), Chinese (C), Indian (I), Other (O).	Married (M) or Single (S) or 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 15 years of age.)	The month in which the person died.	Disease or cause of death.	Was the disease not contracted at the place where the person died?	Name of attending Physician.			
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
W. S. Batehall from F.	18 m 21					Tenn	18	Tenn	Rooming	Dec.	Chorea & Rheumatism		J. H. Bilehelt			
W. S. Batehall & C.	12 F 21					Tenn	18	Tenn	Brook. Supperation	Dec.	Brook. Supperation					
W. S. Batehall & C.	70 m 21					Tenn	18	Tenn	Farming	Dec.	Chorea & Rheumatism					
Additions to Hennepin Co. from Supplemental Schedules																
Dunlop, Henry	23 m 11					Tenn	18	Tenn	13th Kentucky E. D. No. 123.	July	Dropsy					
Williams James	17 m 11					Tenn	18	Tenn	4th Tenn E. D. No. 78	June	Shot Accident					
Boswell Laura	4 F 11					Tenn	18	Tenn	1st Kentucky E. D. No. 102.	Jan	1st Cold Fever					
Adair Sanders	1/2 m 11					Tenn	18	Tenn	4th Tenn E. D. No. 69.	Aug.	Brain Fever					

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 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 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.

Physician has reported these cases.

Supervisor's Dist: No. 4
Enumeration Dist: No. 73

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 *Civil District 7*, in the County of *Haring*, State of *Illinois*. *L. L. Wright*

Enumerators

[illegible]

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

Place where the family of the decedent¹ 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

Place where the death occurred:

Country	State
---------	-------

REMARKS.

being in the ... that ... to ...
 ...
 ...
 ... by the family

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 falling 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				13				25			
2				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			

Page No. 2
 Supervisor's Dist. No. 4
 Enumeration Dist. No. 13

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.)

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Con. Dist. No. 13, in the County of Henry, State of Georgia. D. P. McCrell Enumerator.

Enumerator.																		
Name of the person deceased.			Age at last birthday, if under 1 year, give month & day; if 1 year or over, give month & day; if 1 year or over, give month & day.		Personal Description.		NATIVITY.		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 this place.		Name of attending Physician.	
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.		
1. <u>John Paul</u>	<u>40</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
2. <u>William Henry</u>	<u>11</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
3. <u>William Ed.</u>	<u>40</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
4. <u>John Paul</u>	<u>40</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
5. <u>John Paul</u>	<u>22</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
6. <u>John Paul</u>	<u>22</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
7. <u>John Paul</u>	<u>7</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
8. <u>John Paul</u>	<u>65</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		
9. <u>John Paul</u>	<u>2</u>	<u>M</u>	<u>W</u>	<u>1</u>				<u>Georgia</u>	<u>Georgia</u>	<u>Georgia</u>	<u>None</u>	<u>1</u>	<u>None</u>	<u>1</u>		<u>None</u>		

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.

I have made every effort to get the Certificates of attending Physicians in the above cases, but have failed to do so in consequence of the absence of the most prominent one. I have called the attention of an immanent Retired Physician to the list & he reports it correct.

D. P. McCrell, Enumerator
 4th Apr. Dist 13-80

Page No. 1
 Supervisor's Dist. No. 4
 Enumeration Dist. No. 44

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 44 Dist, in the County of
 Henry, State of Tennessee, E. J. Lowrey

Enumerator.

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
1	3	Atkins Amanda	24	F	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
2	11	McDermott Lela	11	F	P	/		Tennessee	Virginia	Leban	Leban	Leban	Leban	24	Tennessee	Leban
3	20	Hammett Maggie	27	F	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
4	24	Wiley Ellen	8	F	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
5	25	Edwards Stella	24	F	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
6	8	Wright Emma	30	F	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
7	108	McCook Martha	43	F	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
8	124	Cooperman Jacob J	54	M	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban
9	134	Brewer Canby J	1	M	P	/		Tennessee	Leban	Leban	Leban	Leban	Leban	24	Tennessee	Leban

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.
5	9 Civil Dist. Henry	Tennessee	

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.
5	9 Civil Dist. Henry	Tennessee	

REMARKS.

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.).

1058

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[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 hip; 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.

This is to certify that the foregoing is right and correct and set the other two to be

*C. H. Longley
C. H. Longley*

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				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			

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 Diamond reports, column 8, when the letter "A" will 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 11 civil District, in the County of Henry, State of Ohio. Resided 10 years

Enumerator.

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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:

Of the deaths reported above, the following occurred out of this enumeration district, though the families to which the deceased belonged; resided June 1, 1950, in this enumeration district, as follows:

[illegible]

REMARKS

REMARKS.
The Cases of Dr A. A. Wilson I am not sufficiently posted as to the cause of their deaths to give any thing like a correct statement. J. R. Nelson M.D.

The case No. 9 had been sent six months before I saw her I noted this but twice she was eleven miles distant from No. 7. We in a dying institution when I first saw her she died with forty eight hours thereafter she had been afflicted twelve months. These cases seemed out of my usual territory and was forgotten in my death report to the census office. I do not recall

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	Inf of Bronc		J. H. Wilson	13				25			
2	Inf of Bronc	Exhaustion	J. H. Wilson	14	Cardiac failure			26			
3	Inf of Liver		J. H. Wilson	15	Large Lungs		J. H. Wilson	27			
4	Inf of Bowels		J. H. Wilson	16				28			
5	Inf of Liver		J. H. Wilson	17				29			
6	Inf of Bowels		J. H. Wilson	18				30			
7	Inf of Bronc	Exhaustion	J. H. Wilson	19				31			
8	Inf of Bronc		J. H. Wilson	20				32			
9				21				33			
10				22				34			
11				23				35			
12				24				36			

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 14 civil Districts, in the County of Henry, State of Tenn. Joseph T. Dunn

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.		Date of cause of death.		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.	
1-270	Mahan T.A.	49 M W	/					Tenn			Tanning	April 20	Cataract	0	48	Williams	
271	Cole Timmer	38 F W	/					Tenn	N.C.	N.C.	Keeping house	Nov	Constitutional	0		Williams	
306	Spright Rebecca	24 F W	/					Tenn			Keeping house	Jan	Consumption	0		Edmonds & Co.	
306	Keshot	1 M W	/					Tenn	Tenn	Tenn		Jan	Infection Brain	0		Wilson P.R.	
309	Grasino J.L.	59 M W	/					Ky			Tanning	Nov	Oncinoma	0	21	Williams J.W.	
309	Bumpass Mary	14 F W	/					Ky	Ky	Tenn	At Home	D.C.	Consumption	0		"	
337	Poyner James	55 M W	/					Tenn	Tenn	"	Tanning	Jan	Consumption	0	30	"	
337	William	40 M W	/					Tenn						0		"	
3	Lavette Margrit	31 F W	/					Tenn			Keeping house	May	Stomach	0		Williams J.W.	
346	Paty Cora	9 F W	/					"	Tenn	Tenn		Jan	Dropsy	0		"	
350	Drunkara Luc	1/2 M W	/					"	Va	Tenn		D.C.	River	0		"	
352	Woods	(57) F W	/					"				Sept	Purpura	0		Wilson P.R.	
13																	
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35																	
36																	

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.

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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 (35), meaning that the best estimate of the age that can be given is 25 years.

<p>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:</p>				<p>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:</p>			
Number of the line upon which this case is reported above.	Place where the family of the deceased resided June 1, 1880.			Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.		Town.	County.	State.
1	Palmerville	Wetzel	Tenn				
2	Bradleyville	"	"				

REMARKS.

Case No 5 occurred out of my twisting of practice she had been afflicted many months and
was in a dying condition when I visited her I saw her but once and never heard of her again
and consequently did not report the case in my ensuing return J. C. Williams

INSTRUCTIONS.

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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.

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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 X	Paralysed	Cataract	Jos M. Mellon	13	Injury		Jos M. Mellon	25			
2 X	Cerebral	Cerebral	Jos M. Mellon	14				26			
3 X	Phthisis pulmonalis	Exhaustion	J. H. Edmunds	15				27			
4	Congestion	Brain	J. H. Edmunds	16				28			
5	Pneumonia		Jos M. Mellon	17				29			
6	Congestion		Jos M. Mellon	18				30			
7	Congestion		Jos M. Mellon	19				31			
8				20				32			
9	Slow Fever		Jos M. Mellon	21				33			
10	Dropsy		Jos M. Mellon	22				34			
11	Hives		Jos M. Mellon	23				35			
12				24				36			

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.)

Henry, State of Tennessee, Or Can do & Braswell

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
Leonardo Radant	64	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Smith Lucas	1	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Radina Mary	68	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Purchal Anna	3	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Corr Hugh	9	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
King Arthur	2	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Keppingsworth A. M.	35	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Lawrence Emily	1	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Malone Sarah	32	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Sherrin A. E.	17	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Samuels George	7	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Washburne George	6	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Raschal Emma	23	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Raschal Emma	66	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Raschal George	3	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Stevens Thomas	74	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Boyle Sarah	22	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Raschal Emma	1	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Walter Catherine	39	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Walter Thomas	21	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
King Edward	25	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Summers George	63	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Samuels Lee	1	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Summers George	18	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Dick Lene	3	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
Walter Thomas	43	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1
E. R. Alexander Nancy	65	W	1	North Carolina	W	1	1	North Carolina	W	1	1	1	1	1	1	1

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 age can only be estimated, or a birth-place must be conjectured, the entry may be inclosed in parentheses, thus: Age (35), meaning that the best estimate of the age that can be given is 25 years.

[illegible]

The Physicians whose names are reported with the above cases who have not signed the certificate on the opposite side of this sheet are not in the State at this time. Consequently I could not get their names - but the cases are unattended as the families of the deceased report a them to me and that is the best information I could get under the circumstances.

Respectfully
Obedt & Maxwell

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	Regurgitation of the heart	J. H. Sale M.D.	25	Consumption	L. L. Alexander		
2				14	Pneumonia	J. H. Sale M.D.	26				
3				15	Leaves of the Dorsal V.	J. H. Sale M.D.	27	Consumption	L. L. Alexander		
4	Pneumonia		L. L. Alexander	16	Chronic bronchitis	J. H. Sale M.D.	28				
5	Pneumonia		J. H. Sale M.D.	17	Pneumonia	J. H. Sale M.D.	29				
6				18	Chronic bronchitis	J. H. Sale M.D.	30				
7	Typhoid fever		L. L. Alexander	19	Cholera in funtibus	L. L. Alexander	31				
8	Bronchitis		L. L. Alexander	20			32				
9	Cholera		J. H. Sale M.D.	21			33				
10				22	Consumption	L. L. Alexander	34				
11	Pneumonia		L. L. Alexander	23			35				
12	Pneumonia		J. H. Sale M.D.	24	Cancer	J. H. Sale M.D.	36				

Rec'd 10 62

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Supervisor's Dist. No. 4
Enumeration Dist. No. 28

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 18 Enumeration dist. 7, in the County of Henry, State of Tenn. R. A. Owens

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.		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.	
1	2 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Arkns	March	Dysentery				J. A. McSwain	
2	3 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
3	4 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
4	5 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
5	6 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
6	7 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
7	8 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
8	9 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
9	10 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
10	11 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
11	12 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
12	13 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
13	14 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
14	15 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
15	16 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
16	17 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
17	18 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
18	19 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
19	20 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
20	21 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
21	22 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
22	23 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
23	24 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
24	25 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
25	26 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
26	27 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
27	28 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
28	29 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
29	30 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
30	31 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
31	32 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
32	33 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
33	34 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
34	35 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
35	36 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
36	37 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
37	38 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
38	39 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
39	40 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
40	41 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
41	42 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
42	43 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
43	44 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
44	45 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
45	46 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
46	47 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
47	48 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
48	49 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
49	50 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
50	51 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
51	52 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
52	53 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
53	54 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
54	55 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
55	56 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
56	57 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
57	58 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
58	59 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
59	60 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
60	61 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
61	62 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
62	63 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
63	64 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
64	65 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
65	66 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
66	67 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
67	68 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
68	69 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
69	70 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
70	71 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
71	72 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
72	73 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
73	74 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
74	75 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
75	76 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
76	77 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
77	78 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
78	79 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
79	80 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
80	81 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
81	82 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
82	83 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
83	84 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
84	85 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
85	86 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
86	87 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
87	88 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
88	89 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
89	90 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
90	91 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
91	92 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
92	93 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
93	94 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
94	95 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
95	96 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
96	97 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
97	98 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
98	99 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	
99	100 Pfleger M. B.	2	m	w	1			Tenn	Tenn	Tenn	March	Dysentery				J. A. McSwain	

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.			Place where the death occurred.		
	Town.	County.	State.	Town.	County.	State.
15.				Henry	Tenn	
21.				Andover	Mo.	

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.
15.			
21.			

REMARKS.

The man on 15th line came to his death by the accidental tumbling of a load of cotton while a stay in cotton gin. 15th by the accidental shot from a pistol in the hands of a load of bag the remaining lines from the census stated.

Respectfully R. A. Owens, Enumerator

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

, in the County of

Tennessee, State of Tennessee

Geo W. Jackson

Enumerator

[illegible]

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:

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:

[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 hip; 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>L.W. Brown, L.D.M. Lark</i>	13			<i>Dr. H. J. Jones</i>	25			
2			<i>Dr. Wm. A. Allen</i>	14			<i>John A. Allen</i>	26			
3			<i>Dr. Wm. A. Allen</i>	15			"	27			
4				16			<i>Dr. H. J. Jones</i>	28			
5			<i>John A. Allen</i>	17				29			
6			<i>John A. Allen</i>	18			<i>Dr. H. J. Jones</i>	30			
7			"	19			<i>Dr. H. J. Jones</i>	31			
8			"	20			<i>Dr. H. J. Jones</i>	32			
9			"	21			<i>Dr. H. J. Jones</i>	33			
10			<i>Dr. Wm. A. Allen</i>	22				34			
11			<i>John A. Allen</i>	23				35			
12			"	24				36			