

Page No. 1

Supervisor's Dist. No. 3

Enumeration Dist. No. 149

[7-22]

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 *1418 Theobalds*, in the County of *Maury*, State of *Tennessee*. *W. C. Gibson*

Enumerator *W. C. Gibson*

Enumerator, 1917																			
Name of the person deceased.		Personal Description.			What was the civil condition of the person who died?			NATIVITY.		Profession, Occupation or Trade.		If the month in which the person died.		Disease or cause of death.		If the deceased was not a resident of the county at date 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	James	1872																	
2	John	1872																	
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129	John	1872																	

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

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

Mary

REMARKS.

Resected August 8, 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 20th Civil District, in the County of Maury, State of Tennessee

C. N. Taught

Enumerator. / /

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Name of the person deceased.	Sex	Age	Color	Married	Single	Divorced	Widowed	Place of birth of this person, naming the State or Territory, if of the country, if of foreign birth.	Where was the person born?	Where was the person born?	Profession, occupation or trade.	The month in which the person died.	Disease or cause of death.	Duration of the illness, in days.	Place where the deceased was taken to place of death.	Name of attending Physician.
Shaw - Short	M	3	B					Tennessee	Tennessee	Tennessee	Leborr	September	Diphtheria	3		Dr. J. G. Gorgey
Sherril Hannah	F	16	B					Tennessee	Tennessee	Alabama		January	Consumption	10		Dr. Moore
33 Arthur Ball's	M	36	B					Tennessee	Tennessee	Alabama		July	Cholera Infantum			None
36 White Sammie D	M	32	B					Tennessee	N. Carolina	Alabama		Nov	Scrophula			Dr. S. Hill
2 Nathan Vargitt	M	30	B					Virginia	Virginia	Virginia	Carpenter	April	Old Age	71		Dr. S. Hill
48 Voss Jorda	M	38	B					Tennessee	Tennessee	Virginia	House Keeper	January	Consumption	39		Dr. S. Hill
William Johnson	M	11	B					Tennessee	Tennessee	Tennessee		March	Scrophula	11		Dr. S. Hill
51 Tennessee Bailey	M	9/12	B					Tennessee	Tennessee	Tennessee		May	Whooping Cough	42		Dr. S. Hill
Maggie Hamilton	F	7	B					Tennessee	Tennessee	Tennessee		January	Consumption	7		Dr. S. Hill
60 Eddie Gelfert	M	4/12	B					Tennessee	Kentucky	Mississippi		January	Scrophula	10/1		Dr. S. Hill
78 Louisa E. Smith	F	12	B					Tennessee	Tennessee	Tennessee	School Girl	June	Blood Poison	12		Dr. S. Hill
79 William K. Hamilton	M	5	B					Tennessee	Tennessee	Tennessee		October	Diphtheria	5		Dr. S. Hill
81 Jimmie Benton	M	1/2	B					Tennessee	Tennessee	Tennessee		May	Cholera Infantum	1		Dr. S. Hill
Henri Wilson	M	5/6	B					Tennessee	Tennessee	Tennessee		Oct		4		Dr. S. Hill
92 Agnes Alexander	F	5	B					Tennessee	Tennessee	Tennessee		March	Consumption	5		Dr. S. Hill
Maggie Alexander	F	7	B					Tennessee	Tennessee	Tennessee		July	Consumption	9		Dr. S. Hill
Ella Lottman	F	4	B					Tennessee	Tennessee	Tennessee		June	Consumption	4		Dr. S. Hill
116 Ella Goring	F	1/30	B					Tennessee	Tennessee	Tennessee		August	Strangled Throat			Dr. S. Hill
122 William Perkins	M	21	B					Tennessee	Tennessee	Tennessee	Lab	March	Diphtheria	21		Dr. S. Hill
141 Thomas Burns	M	3/30	B					Tennessee	Tennessee	Tennessee		October	Cholera Infantum	3/30		Dr. S. Hill
148 E. Brown	M	3/30	B					Tennessee	Tennessee	Tennessee		March				Dr. S. Hill
151 Belle Matthews	F	3/30	B					Tennessee	Tennessee	Tennessee		April	Spasms	9/30		Dr. S. Hill
165 Mary Thompson	F	7	B					Tennessee	Tennessee	Tennessee		October	Diphtheria	1/10		Dr. S. Hill
156 Annis E. Brown	F	57	B					Tennessee	Virginia	Virginia	House Keeping	February	Typhoid Fever	57		Dr. S. Hill
166 Altha M. Hayward	F	3/6	B					W. Carolina	N. Carolina	W. Carolina	Harmer	January	Consumption	30		Dr. S. Hill
167 Nick Hughes	M	5	B					Tennessee	Tennessee	Tennessee		August	Diphtheria	3		Dr. S. Hill
171 Kate	F	10	B					Tennessee	Tennessee	Tennessee		August	Diphtheria	12		Dr. S. Hill
180 Ellen J. Brown	F	3	B					Tennessee	Tennessee	Tennessee		January	Diphtheria	3		Dr. S. Hill
190 Willie E. Brown	F	1	B					Tennessee	Tennessee	Tennessee		January	Diphtheria	3		Dr. S. Hill
194 Alexander Nelson	M	3/30	B					Tennessee	Tennessee	Tennessee		January	Diphtheria	3/30		Dr. S. Hill
196 Johnnie Dobkins	F	4	B					Tennessee	Virginia	Tennessee		January	Measles	4		Dr. S. Hill
199 Martha Allen	F	1	B					Tennessee	Tennessee	Tennessee		July	Pneumonia	1		Dr. S. Hill
203 Ned S. Hood	M	1/2	B					Tennessee	Tennessee	Tennessee		May	Diphtheria	1		Dr. S. Hill
201 Loretta May Moten	F	6	B					Tennessee	Tennessee	Tennessee		September	Diphtheria	6		Dr. S. Hill
211 B. Hutton	F	4	B					Tennessee	Tennessee	Tennessee		September	Diphtheria	4		Dr. S. Hill
216 John R. Bellum	M	5	B					Tennessee	Tennessee	Tennessee		January	Diphtheria	11		Dr. S. Hill
216 Thomas M. Lamm	M	1/2	B					Tennessee	Tennessee	Tennessee		January	Diphtheria	5		Dr. S. Hill

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

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.

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 care, seeking every source of information. When a positive statement is impossible, as when an age can only be estimated, or a place must be conjectured, the entry may be inclosed in parentheses: thus: Age (25), meaning that the best estimate of the age that can be given is 25 years.

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

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

Town. County. State.

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

Place where the death occurred.

Town. County. State.

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, blowing, shooting, poisoning by opium, arsenic, &c.

A space is left at the bottom of each page of this Schedule for remarks, and 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 the case is reported.	CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN	Number of the line upon which the case is reported.	CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN
	Primary	Immediate			Primary	Immediate	
1				13			
2				14			
3				15			
4				16			
5				17			
6	Consumption	Consumption	L. L. McEwen	18			
7	Scrophula	Scrophula	L. L. McEwen	19	Intoxication of Acute Alcoholism	Acute Alcoholism	L. L. McEwen
8				20			
9				21			
10				22			
11	Complicated Hemorrhagic Blood Men		L. L. McEwen	23			
12				24	Sub. Meningitis	Sub. Meningitis	L. L. McEwen
				25			
				26			
				27	Croup	Croup	L. L. McEwen
				28	Scrophula	Scrophula	L. L. McEwen
				29			
				30			
				31			
				32			
				33	Scrophula	Scrophula	L. L. McEwen
				34	Scrophula	Scrophula	L. L. McEwen
				35	Scrophula	Scrophula	L. L. McEwen
				36	Scrophula	Scrophula	L. L. McEwen
				37	Croup	Croup	L. L. McEwen
				38	Scrophula	Scrophula	L. L. McEwen

Received August 30

[7-222]

Page No. 2

Supervisor's Dist. No. 3

Enumeration Dist. No. 15

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 married 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 20th Civil District in the County of Maury State of Tennessee Chas. V. Vaughn Enumerators 178

Name of the person deceased.	Sex and Age (Indicate if aged 15 years or under, and if under 5 years, state the month and day of birth.)	Race (Indicate if colored, and if white, state the color.)	What was the condition of the person who died? (Indicate if single, married, widowed, divorced, or separated.)	Place of birth of this person, giving the State or Territory of the U. S., or the country, if foreign born.	Where was this person born? (Indicate if in the U. S., or the country, if foreign born.)	Profession, occupation or Trade.	Time elapsed from the date of death to the date of enumeration.	Disease or cause of death.	If the disease was not reported, state the place of death, state the place.	Name of attending Physician.
174 Alfred Piffle	60 M R	1	1	Tennessee	Tennessee	Farmer	July	Consumption		Dr. W. H. Cunningham
237 Nellie Gault	70 F W	1	1	Tennessee	Tennessee	None	June	Spasms		
250 Knott Eliza	40 F B	1	1	Tennessee	Tennessee	Washing house	June	Consumption		Dr. H. A. Cunningham
250 George Deftwick	40 M R	1	1	Tennessee	Tennessee	Farmer	July	Held		Dr. Cunningham
270 Amanda Thomas	38 F W	1	1	Tennessee	Tennessee	None	July	Consumption		Dr. Taylor & Harker
272 Robert Adams	74 M W	1	1	Tennessee	Tennessee	Farmer	March	Old Age		Dr. Cunningham
275 Harmon Quize	2 M R	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. C. C. McEwen
275 Benjamin Young	700 M R	1	1	Tennessee	Tennessee	None	June			Dr. C. C. McEwen
276 Thomas Brad	12 M W	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. C. C. McEwen
276 Virginia J. Gaud	11 F W	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. C. C. McEwen
276 Robert Gaud	6 M W	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. C. C. McEwen
279 Emma Eliza	9 F B	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. C. C. McEwen
284 John Mack	1 M B	1	1	Tennessee	Tennessee	None	April	Diphtheria		Dr. W. H. Cunningham
290 Charles Merg	42 M R	1	1	Tennessee	Tennessee	None	August	Inflammation of Bowels		Dr. C. C. McEwen
294 John Anderson	40 M R	1	1	Tennessee	Tennessee	Farmer	May	Consumption		Dr. W. H. Cunningham
307 Mary P. Peterson	39 F W	1	1	Tennessee	Tennessee	Washing house	April	Child Birth		Dr. C. C. McEwen
310 Mary E. Deller	18 F W	1	1	Tennessee	Tennessee	At home	May	Consumption		Dr. C. C. McEwen
312 Martha R. R. R.	15 F B	1	1	Tennessee	Tennessee	None	March	Infantile Parotid		Dr. B. H. Hogg
315 Lillie E. R. R.	2 F W	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. B. H. Hogg
322 Richard Hamman	6 M W	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. W. H. Cunningham
322 Emma Hamman	4 F W	1	1	Tennessee	Tennessee	None	October	Diphtheria		Dr. W. H. Cunningham

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

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

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

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

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

Number of the deceased
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 deceased
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 lungs*, *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 *thick abscess*, *abscess of liver*, *femoral aneurism*, *carbuncle on lip*, *cancer of breast*, *cancer of uterus*, *cancer of foot*, *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
	Primary	Immediate			Primary	Immediate	
1				13			
2				14	Inflammation of lungs	Same	L. B. Forger
3				15	Pneumonia	Same	L. B. Forger
4				16	Hemorrhage from lungs	Same	L. B. Forger
5				17	Measles	Same	L. B. Forger
6				18	Typhoid fever	Same	L. B. Forger
7	Diphtheria	Diphtheria	L. B. Forger	19	Diphtheria	Diphtheria	L. B. Forger
8	Diphtheria	Diphtheria	L. B. Forger	20			
9	Diphtheria	Diphtheria	L. B. Forger	21			
10	Diphtheria	Diphtheria	L. B. Forger	22			
11	Diphtheria	Diphtheria	L. B. Forger	23			
12	Diphtheria	Diphtheria	L. B. Forger	24			

Page No. 1

Supervisor's Dist. No. 3
Enumeration Dist. No. 152

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 the age relative to the entries in column 14, see back of this Schedule.
Note D.—In column 17, note distinctly if no Physician was in attendance, thus None.

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in the 22nd & 23rd District, in the County of Maury, State of Tennessee, S. P. Shaley, Enumerator.

Name of the person deceased	Sex	Age	Color	Place of birth	When was the person last seen alive	Where was the person last seen alive	Profession, occupation or trade	Time of death	Place or cause of death	Was the person ever in the service of the United States	If the disease was not continuing at the time of death, state the place	Name of attending Physician
Sharber Wd	M	21	W	Tennessee	June Term	Tenn	Teacher Dec	Sept	Sept	21	Sept	Sharber J. W.
Nelson Infant	F	30	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Madison Infant	F	30	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Bailey A. H.	M	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Peters Emma	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Chenais Infant	F	5	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Chandler Betty	F	60	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Burgess Infant	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Sellers Infant	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Smith Charles	M	6	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
McGee Hattie	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Keays Benj	M	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Waplington S. S.	M	30	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Madison Infant	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Wardman Emily	F	28	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Porter Infant	F	50	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Waddox Hester	F	16	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Waddox Infant	F	16	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Hardin Maggie	F	28	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
White Ellen	F	39	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Thompson	M	20	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Po Tis S. J.	M	27	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Forwood Emma	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Simmons Nina	F	25	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Hester Caroline	F	34	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Flowers Elsie	F	3	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Gray S. H.	M	1	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
McGee Emily	F	6	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Chandler Mary	F	15	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Helmes Sally	F	45	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Johnson Thomas	M	35	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Allen Willie	M	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Belton Andrew	M	1	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Helmes James	M	18	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Burnett Mary	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Lockridge Infant	F	12	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
Overton Hattie	F	11	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.

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.

Name of the person deceased	Sex	Age	Color	Place of birth	When was the person last seen alive	Where was the person last seen alive	Profession, occupation or trade	Time of death	Place or cause of death	Was the person ever in the service of the United States	If the disease was not continuing at the time of death, state the place	Name of attending Physician
20 Nashville Davidson	M	21	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.
29 23 rd District Maury	F	23	W	Tennessee	June Term	Tenn		Sept	Sept		Sept	Sharber J. W.

REMARKS.

Have been so busy in trying to get up this schedule, and a many of the colored deaths, in, was so numerous or common with, I think it is correct.

S. P. Shaley.

INSTRUCTIONS.

The important point in this Schedule is the question in column 44, 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 tip; 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. Special 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 *adipose*, or *intemperance*, or *depleting*, 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 malarial 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 re-state 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 this 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.

CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN	CAUSE OF DEATH	SIGNATURE OF THE ATTENDING PHYSICIAN
Primary	Immediate		Primary	Immediate
1			1	
2			2	
3			3	
4			4	
5			5	
6			6	
7			7	
8			8	
9			9	
10			10	
11			11	
12			12	

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 the 22^d Civil District, in the County of

Meany

State of Tennessee

G. B. Straley.

Enumerator.

Name of the person deceased.	Age at death.	Sex.	Color.	Married.	What was the civil condition of the person who died?	Place of birth of this person, naming the State or Territory, and the U. S. or of the country, if not origin born.	When was the father of this person born?	When was the mother of this person born?	Not to be asked in respect to persons under 10 years of age.	Profession, occupation or trade.	The month in which the person died.	Disease or cause of death.	If the person was not enumerated in this census, state the month in which he was last seen.	Name of attending Physician.
Brooks Bud	8 M	B				Tennessee Tenn Tenn						Sept leucop		McAllard J
Goldwell infant	7 M	B				Tennessee Tenn Tenn						Sept Still Born		none
Parham infant	10 M	B				Tennessee Tenn Tenn						March unknown		none
Shes-a-Kerry	12 M	B				Tennessee Tenn Tenn						Oct worms		Hardis D
Harwell J B	72 M	W				Tennessee Georgia Ala						Sept hooping cough		none
Leakinton Hugh	32 M	W				Tennessee Tenn Tenn				Farmer				
Oliver Moses	71 M	B				North Carolina N.C. N.C.				Calver		Paralysis		Hardis J
Oliver Peggy	65 F	B				N.C. N.C. N.C.				Keppin John		Sept measles		none
Wade Willie	72 M	B				Tennessee Tenn Tenn						Oct Lethargy		none
Camphel Peter	42 F	B				Tennessee Tenn Tenn						Nov Hooping cough		none
Morris Jane	7 F	W				Tennessee Tenn Tenn						Oct Malaria fever		Boyd J M
Moore Elizabeth	72 M	B				Tennessee Tenn Tenn						Sept measles		McAllard J
Harper Elizabeth	57 F	W				Tennessee Tenn Tenn				Housewife		Rheumatism		none
Harper Jennie	2 F	W				Tennessee Tenn Tenn						Oct hooping cough		none
Mailes infant	30 M	B				Tennessee Tenn Tenn						Apr unknown		none
Lee George	2 M	B				Tennessee Tenn Tenn						March worms		none
Valley Rosa	13 F	W				Tennessee Tenn Tenn						Sept worms		none
Farmer Geo D	1 M	B				Tenn						Oct Consumption		Crump
Farmer John	16 M	B				Tenn						Oct Consumption		Crump
Lowell Harriet	13 F	W				Tenn				Farmer		Apr Typhoid fever		Lee
Jordan Nath	86 M	W				Tenn				Farmer		Jan Consumption		McAllard
Hilum James	19 M	B				Tenn				Farmer		Nov Typhoid fever		McAllard
Harris Ann	36 F	B				Tenn				Farmer's wife		Jan Rheumatism		McAllard
Grady Robin Lee	15 F	W				Tenn				Farmer		Oct Typhoid fever		Crump
Grady Samuel	50 M	W				Tenn				Farmer		Oct Typhoid fever		Crump
Chandler Lou	33 F	B				Tenn				Farmer's wife's pub.		Typhoid fever		McAllard
Allen Mary	18 F	B				Tenn				Farmer's wife's pub.		Typhoid fever		McAllard
Dotter James	10 M	B				Tenn				Farmer's wife's pub.		Jan Typhoid fever		Harvey

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 a native 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.

3. 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.

17. Straley Geo. D. Tenn.

4. 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.

11. 22^d district Meany Tenn

REMARKS.

In the above schedule one death was reported by two different physicians, and will see above correction, one death was reported to me at The Court House which had omitted.

Straley Geo. 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 *lung abscess*, *abscess of liver*; *femoral aneurism*; *carbuncle on hip*; *cancer of breast*, *cancer of uterus*, *cancer of ear*; *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, he 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.		Number of the line on Schedule upon which this case is reported.	CAUSE OF DEATH.		Number of the line on Schedule upon which this case is reported.	CAUSE OF DEATH.	
	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		

I certify that I have this day completed the enumeration of deaths in this district, and that the returns thereon have been fully made in accordance with law, and my official duty.

Wm. C. Burroughs, Enumerator.

J. J. Buckley, Registrar.

Note A.—The Census Year began 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 the 2nd Cent. district, in the County of Mary, State of Tenn. R. J. Baughman
 Enumerator. 101

Name of the person deceased.	Personal Description.	What was the condition of the person who died?	Place of birth of the person, naming the State or Territory of the U. S., or the country, if not born here.	Where was the person born?	Where was the person born?	Profession, Occupation or Trade.	The month in which the person died.	Disease or cause of death.	Age at death.	If the disease was not contracted at place of death, state the place.	Name of attending Physician.
141 Thompson H. L.	5 M B 10		Tenn	Tenn	Tenn	Accident			3		Dr. B. B. Cox
21 Thompson, Maria	10 F B 10		Tenn	Tenn	Tenn	Accident			10		Dr. B. B. Cox
26 Johnson John B.	76 M 10		Virginia	Virginia	Virginia	Accident			10		Dr. Sharber
143 Johnson Elias	22 M 10		Tenn	Tenn	Tenn	Accident			22		Dr. L. S.
65 Evans Henry J.	2 M 10		Tenn	Tenn	Tenn	Accident			2		Dr. Mallard
55 Edwards Jackson	14 M 10		Tenn	Tenn	Tenn	Accident			14		Dr. Mallard
140 Stewart Scott	7 M 10		Tenn	Tenn	Tenn	Accident			7		Dr. Mallard
146 Lyons Mary	14 F 10		Tenn	Tenn	Tenn	Accident			14		Dr. Mallard
152 Hupkins Scott	37 M 10		Tenn	Tenn	Tenn	Accident			37		Dr. Mallard
145 Norris William	6 M 10		Tenn	Tenn	Tenn	Accident			6		Dr. Sharber
151 Nixy Porter	2 M 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
144 Brady Francis	4 M 10		Tenn	Tenn	Tenn	Accident			4		Dr. Sharber
147 Green Kate	4 F 10		Tenn	Tenn	Tenn	Accident			4		Dr. Sharber
148 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
149 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
150 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
151 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
152 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
153 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
154 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
155 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
156 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
157 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
158 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
159 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
160 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
161 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
162 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
163 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
164 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
165 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
166 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
167 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
168 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
169 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
170 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
171 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
172 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
173 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
174 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
175 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
176 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
177 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
178 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
179 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
180 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
181 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
182 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
183 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
184 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
185 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
186 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
187 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
188 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
189 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
190 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
191 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
192 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
193 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
194 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
195 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
196 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
197 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
198 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
199 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber
200 Green Lillie	2 F 10		Tenn	Tenn	Tenn	Accident			2		Dr. Sharber

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 family to which the deceased belonged, as reported above.

Place where the family at the deceased resided June 1, 1880, as reported above.

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 the enumeration district, as follows:

Number of the family to which the deceased belonged, as reported above.

Place where the death occurred.

Town. County. State.

REMARKS.

Thompson H. L. crashed in cogwheel of cotton gin
 Dr. Sharber lives out of District and could not see him

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 alcoholism, 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				13				25			
2	Contusion of head		W. S. Gray	14				26			
3				15	Typhoid pneumonia		W. S. Gray	27			
4				16				28			
5	Lung cancer		W. S. Gray	17				29			
6	Scrophulous		B. J. H. H. H.	18				30			
7	Stomach		W. S. Gray	19				31			
8	Stomach		W. S. Gray	20				32			
9	Stomach		W. S. Gray	21				33			
10	Stomach		W. S. Gray	22	Typho malarial fever		W. S. Gray	34			
11				23				35			
12				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" must be used.

Note G.—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.*)

, in the County of

, State of

Enumerator. 182

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, 1901, out of the enumeration district, as follows:

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

Town, _____ County, _____ Sta _____

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.

Supervisor's Dist: No. 354

Enumeration Dist: No. 354

55

[7-222]

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 Meigs in the County of Tennessee

Enumerator: 1

Enumerated.													
Name of the person deceased.	Personal Description.			What was the condition of the person who died?		Place of birth of this person, naming the State or Territory as died, or, if foreign birth, in column 10.	Place of birth of the father of this person, naming the State or Territory as died, or, if foreign birth, in column 11.	Where was the mother of this person born? As in column 11.	Profession, occupation, or Trade.	The month in which the person died.	Cause of death.	If the disease was not one of the pestilential diseases, state the name of the disease.	Name of attending Physician.
	Sex.	Age.	Color.	Single.	Married.								
Lowell Dick	M	4	W	/		Tenn.						Diphtheria	Lee
Robert May	M	7	F	B	/	Tenn.						Chronic Pulmonary	Lee
Hardison	M	7	F	B	/	Tenn.						Croup	Woodall
	M	4	M	B	/	Tenn.						Hydrocephalus	Hardison

Note B.—Upon this Schedule should be CAREFULLY RETURNED

1. Every death which has occurred in this enumeration district during the Census year, whether the deceased was or was not, at death, a member of any family which resided June 1, 1880, in the district.
2. Every death which has occurred outside of this enumeration district during the Census year, the deceased being at date of death a member of a family which resided June 1, 1880, in the enumeration district.
The enumerator should make these entries upon this Schedule with great care, seeking every source of information. When a positive statement is impossible, as when an age can only be estimated, or a birth-place must be conjectured, the entry may be inclosed in parentheses, thus: Age (25), meaning that the best estimate of the age that can be given is 25 years.

Of the deaths reported above, the following occurred within enumeration district, but the deceased was not at home at date of death, out of the enumeration district, as follows:

Name of the deceased, as reported by the informant.
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:

Name of the deceased, as reported by the informant.
Place where the death occurred.
Town, County, State.

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.)

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 24 dist
maury State of **Tenn** **Sam O. Granger** in the County of

Personal Description.																	What was the civil condition of the person who died?		NATIVITY.		Profession, occupation or Trade.		Time of death.		Disease or cause of death.		How long of residence of this family in this State? (If less than 1 year, state month and day.)		If the disease was not contracted at place of death, state the place.		Name of attending Physician.			
Name of the person deceased.																	Married		Place of birth of this person, naming the State or Territory, or the 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.		Not to be asked in respect to persons under 10 years of age.									
																	Single																	
																	Widowed																	
																	Divorced																	
																															</			

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.

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 diarrhea, 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.
	Primary.	Immediate.			Primary.	Immediate.	
1	Correctly stated	Correctly stated	L. P. Lee	13			
2				14			
3				15			
4				16	Correctly stated	Correctly stated	N. F. Long
5				17			
6				18			
7				19			
8				20			
9				21			
10				22			
11	Correctly stated	Correctly stated	L. P. Lee	23			
12	Correctly stated	Correctly stated	N. F. Long	24			
				25			
				26			
				27			
				28			
				29			
				30			
				31			
				32			
				33			
				34			
				35			
				36			

Page No. 1

Supervisor's Dist. No. 3

Enumeration Dist. No. 156

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

Note B.—In making entries in columns 9, 7, and 8, an affirmative mark only will be used, thus /, 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 156th Dist, in the County of Maury, State of Tennessee. J. R. Mooney Enumerator. 15

Name of the person deceased.	Sex and Age	Color	Married	What was the condition of the person who died?	Place of birth of this person, naming the State or Territory of the U. S., or the country, if a foreigner.	Where was the father of this person born?	Where was the mother of this person born?	Profession, occupation, or Trade.	Time, month, or season of death.	Place, or cause of death.	Number of the family in which the deceased resided June 1, 1880.	If the disease was not contracted at place of death, state the place.	Name of attending Physician.
Rumage James F.	30 M	W	/		Tenn	Tenn	Tenn	Liby Cause unknown					
Rumage Geo. E.	30 M	W	/		Tenn	Tenn	Tenn	Liby Cause unknown					
Bush Charles	31 M	W	/		Tenn	Tenn	Tenn	Liby Cause unknown					
Heming Elizabeth	4 F	W	/		Mississippi	Tenn	Tenn	May Cramp					J. M. Boyd
Heming David	2 M	W	/		Mississippi	Tenn	Tenn	Apr. Spinal disease					R. A. Blythe
Brown Lucinda	45 F	W	/		Tenn	A. C.	A. C.	Richingham May Spinal disease					R. A. Blythe
Williamson John	2 M	W	/		Tenn	Tenn	Tenn	July Flu					J. M. Boyd
Vaughan James	45 M	W	/		Tenn	Tenn	Tenn	Farmer Feb Pneumonia					C. C. Smith
Christman Robert	30 M	W	/		Tenn	Tenn	Tenn	Sept unknown					
Malloe Sophia	75 F	W	/		A. C.	A. C.	A. C.	Richingham Feb Spinal disease					J. M. Boyd
Moore Robert	10 M	W	/		Tenn	Tenn	Tenn	Sept Cause unknown					J. M. Boyd
Lawder Hamilton	47 M	W	/		Tenn	Tenn	Tenn	Richingham Sept in child birth					J. M. Boyd
McLennan, Dr. & Co. Richingham													
Hauff Bradley	74 M	W	/		Tenn			3d Tenn E. D. No 143 Aug Cancer on face					Conner M. B.
Lowell Moses	35 M	W	/		Tenn			4th Tenn E. D. No 84 Jan Varicella					J. Begum
Overster Robt	35 M	W	/		Tenn			3d Tenn E. D. No 171 Feb Typhoid fever					Bingham J. F.
Overster Maggie	9 F	W	/		Tenn			3d Tenn E. D. No 171 Feb Typhoid fever					Bingham J. F.
Mattie L. Dooly	6 F	W	/		Tenn			3d Texas E. D. No 203 Oct Diphtheria					J. G. Shaber
Garrett Cordelia	30 F	W	/		Tenn			2nd Texas E. D. No 21 June Diphtheria					Williamson J.
Brewer Geo. E.	17 M	W	/		Tenn			3d Tenn E. D. No 122 Oct Typhoid fever					Jordan
Harmon	24 F	W	/		Tenn			House girl Sept. Unknown					Harmon
Harmon	24 M	W	/		Tenn			House girl Sept. Unknown					Harmon

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.

If the death is reported above, the following occurred in this enumeration district, though the families to which the deceased belonged, resided June 1, 1880, in this enumeration district, as follows:

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

Town. County. State.

If the death is reported above, the following occurred in 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.

Page No.

Supervisor's Dist. No.

Enumeration Dist. No.

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

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

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

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

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in *3 District*, in the County of*Maury*, State of *Tennessee**Thomas*

Enumerator.

Name of the person deceased.	Age at death, in years and months.	Sex.	Color.	Married.	What was the civil condition of the person who died?	Place of birth of this person, naming the State or Territory of the U. S., or the country if foreign born.	Where was the father of this person born? As to country.	Where was the mother of this person born? As to country.	Not to be asked, in respect to persons under 10 years of age.	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.
<i>1. Bir A R</i>	<i>34</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>house keeper</i>	<i>December</i>	<i>Dr. Thomas</i>	<i>at place of death</i>	<i>Dr. D. S. Hardison</i>
<i>2. Jackson N F</i>	<i>5</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>Deputy</i>	<i>December</i>	<i>Dysentery</i>	<i>at place of death</i>	<i>Dr. D. S. Hardison</i>
<i>3. Lyones M H</i>	<i>55</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>North Carolina</i>	<i>North Carolina</i>	<i>North Carolina</i>		<i>keeping house</i>	<i>June</i>	<i>Typhoid fever</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>4. Ewing Harriet</i>	<i>12</i>	<i>F</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>May</i>	<i>Scarlet fever</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>5. Johnson M J</i>	<i>26</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>January</i>	<i>Scarlet fever</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>6. Simpson J W</i>	<i>4</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>November</i>	<i>Dysentery</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>7. Whitehead Sam</i>	<i>25</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>June</i>	<i>not known</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>8. Whitehead Bob</i>	<i>26</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>June</i>	<i>not known</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>9. Jindell J G</i>	<i>7</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>June</i>	<i>Dysentery</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>10. Johnson E W</i>	<i>18</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>North Carolina</i>	<i>North Carolina</i>	<i>North Carolina</i>		<i>keeping house</i>	<i>June</i>	<i>not known</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>11. Anderson B H</i>	<i>7</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>November</i>	<i>Typhoid fever</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>12. Barnett Elizabeth</i>	<i>37</i>	<i>F</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>April</i>	<i>Child birth</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>13. Morris J P</i>	<i>30</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>June 10</i>	<i>Scarlet fever</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>
<i>14. Kirk M</i>	<i>9</i>	<i>M</i>	<i>W</i>	<i>/</i>	<i>Married</i>	<i>Tennessee</i>	<i>Tennessee</i>	<i>Tennessee</i>		<i>keeping house</i>	<i>May</i>	<i>information of deceased</i>	<i>at place of death</i>	<i>Dr. J. M. Boyd</i>

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 July 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.

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

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

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

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:

Number of the line upon which the call is reported

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

Town _____ County _____

* 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

Town.	County.	State.
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REMARKS

Page No.

Supervisor's Dist. No.

Enumeration Dist. No.

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

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

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

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

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in Enumeration 159, in the County of Henry, State of Tennessee. H. H. Hickman, Enumerator.

1.	2.	3. Personal Description.			4. What was the civil condition of the person who died?			5. Place of birth of this person, naming the State or Territory of the U.S., or the country (if foreign born).			12.	13.	14.	15.	16.	17.
		Age and Sex.	Color.	Married.	Single.	Married.	Single.	Place of birth of this person, naming the State or Territory of the U.S., or the country (if foreign born).	Place of birth of this person, naming the State or Territory of the U.S., or the country (if foreign born).	Place of birth of this person, naming the State or Territory of the U.S., or the country (if foreign born).						
2	Ramsby Millie	6 M W	/					Tenn	Ala	Ala		May	Thrash	6		Dr. J. G. Williamson
7	Clay James	3 M B	/					Tenn	Ga	Tenn		Aug	Wines	2		None
28	Wardner Alice	67 F W	/					NC	NC	NC		June	Text	60		Dr. J. G. Williamson
29	Ramsby Nancy	55 F W	/					S.C	S.C	S.C		May	Text	38		Dr. J. G. Williamson
29	Adkins Mervine	54 F W	/					Tenn	Ga	Ga		July	Text	36		Dr. J. G. Williamson
93	Garrett Lucy	13 F B	/					Tenn	Ala	NC		May	Text	17		Dr. J. G. Williamson
120	Brington Larkin L.	40 M W	/					Tenn	Tenn	Tenn		July	Text	40		Dr. J. G. Williamson
140	McMullin L.	10 F B	/					Tenn	Ala	Tenn		May	Text	16		Dr. J. G. Williamson
145	Wardner William	38 M W	/					Ala	Ala	Ala		March	Text	38		None
123	Wicks N. T.	12 M B	/					Tenn	Tenn	Tenn		May	Text	12		None

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

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

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

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

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

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

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

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

REMARKS.

INSTRUCTIONS

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

Enter the name of the primary disease in all cases, and where the immediate cause of death has been a complication or consequence of the primary disease, enter that also. For instance, enter all cases of death resulting either immediately or remotely from *measles, scarlet fever, typhoid fever, remittent fever, small pox, &c.*, under the names of those diseases, but add also *dropsy, hemorrhage from the bowels, pneumonia, &c.*, if these occurred as complications and were the more immediate cause of death. In cases of death from hemorrhage, specify the origin of the hemorrhage, thus: *hemorrhage from aortic aneurism, hemorrhage from ulcer of intestines in typhoid fever, hemorrhage from lungs, hemorrhage from venous 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 a 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.

2. 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		Number of the line on Schedule & upon which this case is reported	CAUSE OF DEATH		Number of the line on which this case is reported	CAUSE OF DEATH	
	Primary	Immediate		Primary	Immediate		Primary	Immediate
1			13			33		
2			14			36		
3			15			37		
4			16			38		
5			17			39		
6			18			40		
7			19			41		
8			20			42		
9			21			43		
10			22			44		
11			23			45		
12			24			46		

Note A - The Census Year begins June 1, 1870, and ends May 31, 1880.
 Note B - In making entries in columns 6, 7, and 8, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 8, when the letter "D" is to be used.
 Note C - For instructions relative to the entries in column 14, see back of this Schedule.
 Note D - In column 17, note distinctly if no Physician was in attendance, thus (None.)

Name of the person deceased.	Age at death.	Sex.	Color.	Married.	Single.	What was the civil condition of the person who died?	Place of birth of this person, naming the State or Territory of the U.S., or the country, if of foreign birth.	Where was the father of this person born? As in column 8.	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.	How long the sufferer of the disease lived after the onset of the disease.	If the disease was not complicated place of death. State the place.	Name of attending Physician.
Angelo William	3 M B					Tennessee	Tennessee	Tennessee		July	Consumption	3		Geo. A. Brown	
Theresa Mary	66 F W					Tenn	W Carolina	W Carolina		Sept	Consumption	26		W B Swine	
Walter Mary	20 F B					Alabama	Ala	Ala		June	Consumption	10		W B Swine	
Lill Tena	1 F B					Tenn	Tenn	Tenn		May	Cholera infantum	1		James G. Williams	
Bell Tennessee	5 F B					Tenn	Tenn	Tenn		Nov	Pistol Shot	5		None	
Fauca Henry	20 M B					Tenn	Georgia	Tenn		Feb	Apnea	20		None	
Albert Albert	16 M B					Tenn	Tenn	Tenn		Worked on farm	June	Coffee, of Chest	16		G. Williamson
Tarrin Lina	11 F B					Tenn	Geo	Tenn		Worked on farm	Feb	Typhoid fever	11		G. Williamson
Anthony Thomas	24 M B					Tenn	Tenn	Tenn		Industrious farm	June	Consumption	20		G. Williamson
Anderson Tena	25 F B					Tenn	Tenn	Tenn		Work	Apr	Consumption	21		G. Williamson
Helen John	12 M B					Tenn	Tenn	Tenn				Consumption	9		G. Williamson
Highman Alfred	20 M B					Tenn	Tenn	Tenn		Farmer	Apr	Pneumonia	43		G. Williamson
Abraham Richard	12 F B					Tenn	Tenn	Tenn			Aug	Scarlet fever	12		None
Henry John	30 M B					Tenn	Tenn	Tenn			Sept	W. a.	60		G. Williamson
Coffey Francis	22 F B					Tenn	Tenn	Tenn		Worked on farm	May	Paratyphoid	22		G. Williamson
Coffey in name	30 F B					Tenn	Tenn	Tenn			Mar	Paratyphoid	30		G. Williamson
Thompson William	12 M B					Tenn	Tenn	Tenn			Apr	Apnea	12		G. Williamson
Robert Rhoda	20 F B					W. Car	W. Car	W. Car			Aug	Plt. reg	50		G. Williamson
Chapin Samantha	6 F W					Tenn	Tenn	Tenn			July		5		David Higdon
Lill Robert	1 M B					Tenn	Tenn	Tenn			May	Convulsion	1		G. Williamson
Pulley Mary	25 F W					Tenn	Tenn	Tenn		Light house	Sept	Typhoid fever	25		G. Williamson
Perry Nelson	5 M W					Tenn	Tenn	Tenn			Aug	Erythema	5		G. Williamson
Williamson Sam	50 M B					Tenn	Tenn	Tenn			July		30		None
Brochum Frances	18 F B					Tenn	Tenn	Tenn		Worked on farm	July		18		None
Hobbs Franklin	3 M W					Tenn	Tenn	Tenn			Nov	Scarlet fever	3		G. Williamson
Williams Bell	12 F B					Tenn	Tenn	Tenn		Worked on farm	Nov	Consumption	12		G. Williamson
Withers Eckey	3 F W					Tenn	Tenn	Tenn			Aug	Scarlet fever	23		G. Williamson
Deaths in Poor House															
Chapman Edna	1 F W					Tenn	Tenn	Tenn				Erythema			H. Matthews
Porter Rhoda	51 F B					Tenn	Tenn	Tenn				Typhoid fever			H. Matthews
Wilson Mary	25 F W					Tenn	Tenn	Tenn				Pneumonia			H. Matthews

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.

Place where the family of the deceased resided June 1, 1954.

Town _____ County _____ State _____

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

Town.	County.	State.

Our Physicians keep Records loosely, and are not positive as to primary or immediate causes.

Page No. 1

Supervisor's Dist. No. 3

Enumeration Dist. No. 161

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

Note B.—In making entries in columns 9, 10, and 11, 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 7th Civil Dist. in the County of Mauvey, State of Tennessee. R. O. Thomas Enumerator. 190

Name of the person deceased	Personal Description	What was the exit condition of the person who died?	NATIVITY	Profession, occupation or Trade	The month in which the person died	Cause or cause of death	How long a resident of the county? If not, how long a resident of the State in which he died	If the disease was not contracted at place of death, state the place	Name of attending Physician
Maxwell Laura	18 F W	/	Tenn	Tenn	Tenn	At home March	Menigeitis	12	W. J. Mathews
Adson Josie	23 F B	/	Tenn	Tenn	Tenn	Keeping house April	Pneumonia	23	C. F. Murphy
Brinkley Charlotte	65 W B	/	Tenn	---	---	Blacksmith Oct	Paralysis	65	C. H. McNight
Horne Edward	67 M W	/	Tenn	---	---	Farmer Jan	Pneumonia	5	S. H. McNight
Thomas Wm	70 F W	/	---	---	---	Nov. Longest	Chill	70	S. H. McNight
Burket A. L.	17 F W	/	Tenn	Tenn	Tenn	Keeping house May	Consumption	17	J. H. Wilkes
Berry Elizabeth	82 F W	/	Tenn	Coastal	Tenn	Farmer May	Old age	61	Nathan Perry
Hagard Richard	53 M B	/	Tenn	Tenn	Tenn	Farmer Nov.	Fever	53	Nathan Perry
Lazaby	72 M W	/	Tenn	Tenn	Tenn	April	Fever	72	Nathan Perry
Murphy E. J. Co.	70 F W	/	Tenn	Var.	Tenn	Keeping house Nov.	Pneumonia	68	Nathan Perry
Scott Jesse	48 M B	/	Tenn	Tenn	Tenn	Farmer Jan.	Consumption	18	J. H. Wilkes
Cotton Belle	60 F W	/	Tenn	Kept	Tenn	Keeping house Nov.	Cancer	60	Nathan Perry
Adkinson Alice	28 F W	/	Tenn	Tenn	Tenn	Keeping house July	In child bed	1	Nathan Perry
Briderman	7 M W	/	Tenn	Tenn	Tenn	Nov.	Dysentery	1	Nathan Perry
Brinkley Harriet	69 F W	/	Tenn	N. C.	Var.	Keeping house Aug.	Cancer	65	J. H. Wilkes
Moore E. J.	54 F W	/	Tenn	N. C.	N. C.	Keeping house Jan.	Consumption	54	J. H. Wilkes
McLean H. W.	37 M W	/	Tenn	N. C.	N. C.	Farmer May	Consumption	37	C. F. Murphy
Gift Eunice	7 F B	/	Tenn	Kept	Tenn	---	Accidentally	7	---
Watson William	65 M W	/	Tenn	---	---	Farmer	Typoid fever	---	Wilkes
Nelson Tunny	37 F B	/	Tenn	---	---	---	Typoid fever	---	Wilkes
Burkett Abigail	73 M W	/	Tenn	---	---	Farmer	Paralysis	---	Wilkes

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 death in 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 death in which the case is reported above

Place where the death occurred.

Town, County, State.

REMARKS.

Page No.

Supervisor's Dist: No.

Enumeration Dist: No.

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

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

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 _____, in the County of _____, State of _____.

Enumerator. 741

[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, 1900, out of the enumeration district, as follows:

Number of the line upon which the case is reported	Place where the family of the deceased resided June 1, 1880.	County	State
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100

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, _____

Town _____ County _____ State _____

✓ 4	250000 bushels	is av. 4	100000
✓ 10	250000 bushels	is av. 4	100000
✓ 8	250000 bushels	is av. 4	100000

REMARKS.

Page No.

Supervisor's Dist. No.

Enumeration Dist. No.

[7-222.]

Aug 8

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 /.

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in *Columbia* in the County of*Maury*State of *Tennessee**H. Dinslow*Enumerator. *118*

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Name of the person deceased	Sex	Age	Married	Color	Native	When was the person born?	Where was the person born?	When was the person last seen alive?	Where was the person last seen alive?	Occupation	Time of death	Place or cause of death	Time of death	Place or cause of death	Time of death	Place or cause of death
8 Boston Rose	80	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
8 Proctor Robert	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
18 Infant	30	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
18 Armstrong Mary	18	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
17 Queen John	41	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
2 Miller Agnes	40	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
23 Vidro George	48	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
30 Kelly infant	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
44 Harlan Lizzie	18	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
64 Allen Elizabeth	16	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
64 Allen George	28	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
112 Queen Lizzie	4	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
131 Harrison D Sam	51	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
178 James Walter	2	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
187 James infant	30	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
188 Lona Mary	32	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
189 Berge Anna	31	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
249 Roebler Lewis	65	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
253 Sam Ella	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
261 Dallen Anna	19	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
283 Bond Mary	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
294 Kara Min	21	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
309 Infant	30	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
318 Biddle Annie	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
318 Biddle Charles	5	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
325 Quinn David	50	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
332 Wright Mary	2	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
376 James Mary	29	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
370 McForthy Lewis	23	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
380 Carter Fred	1	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
385 Wright John	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
392 Hadden Emma	16	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
424 Harkin All	47	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
431 Franklin infant	30	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
443 Jackson Mary	7	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett
456 Dinslow infant	30	4	B	1	George	George	George	George	George	George	19	Feb	19	Feb	19	Dr. Rawlett

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.

At the death reported above, the following occurred: (If the deceased was a member of a family which resided June 1, 1880, in the enumeration district, as follows.)

Place where the death occurred.

Town, County, State.

At the death reported above, the following occurred: (If the deceased was a member of a family which resided June 1, 1880, in the enumeration district, as follows.)

Place where the death occurred.

Town, County, State.

REMARKS.

Page No. 20000
Supervisor's Dist. No. 370
Enumeration Dist. No. 160

Aug 8

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 Columbia in the County of Mary State of Texas H. Dunlap Enumerator.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
455	Gordon	Allen	8	M	B	1		Living	Living	Living		Sept. Cholera Infantum				Dr. Halfacre
486	Kendall	Callie	7	F	B	1		Living	Living	Living		May Septicæmia				Dr. McFarson
486	Kendall	Andrew	2	M	B	1		Living	Living	Living		May Septicæmia				Dr. McFarson
493	Neels	Jack	39	M	B	1		Living	Living	Living		Blacksmith April Consumption				
400	Adcock	William	19	M	B	1		Living	Living	Living		Decr Septicæmia Fever				Dr. Rob Pillow
409	Davidson	Emily	21	F	B	1		Living	Living	Living		Housekeeper March Septicæmia				Dr. Cooy
411	Bradley	Elizabeth	2	M	B	1		Living	Living	Living		March Pneumonia				Dr. Cooy
419	Moore	J. D.	65	M	B	1		Dea	Dea	Dea		Merch. Feb Hart Disease				Dr. Cooy
443	White	Carry	15	F	B	1		Living	Living	Living		Octo Septicæmia	15			Dr. Biddle
543	White	Ada B.	13	F	B	1		Living	Living	Living		Octo Septicæmia	13			Dr. Biddle
546	Kuohler	Infant	4	M	B	1		Living	Living	Living		August Still Born				Dr. Halfacre
473	Beall	Beulah	14	F	B	1		Living	Dea	Living		Pharyngitis				
598	Brace	Kella	14	M	B	1		Living	Dea	Living		March Unknown				
617	Bayler	Arthur	9	M	B	1		Dea	Dea	Dea		At school Sept. Meningitis	1	Dea		Dr. Biddle
585	Moore	Melinda	60	F	B	1		Dea	Dea	Dea		Keeping house July Septicæmia	40			Dr. Smith
588	Moore	Seyman	56	M	B	1		Living	Living	Living		Farmer Feb Hart Disease	56			Dr. Smith
607	Prismann	Emma	22	F	B	1		Living	Living	Living		Keeping house Jan Consumption	22			Dr. Dorset
628	Wright	Ruby	6	F	B	1		Living	Living	Living		Jan Septicæmia	6			Dr. Garland
630	Horton	Martha	18	F	B	1		Living	Living	Living		Worce July Information of Brain	18			Dr. Dorset
634	Black	George	14	M	B	1		Living	Living	Living		Octo Unknown	14			Dr. Biddle
639	Richardson	Wiley	42	M	B	1		Dea	Dea	Dea		Merch. Nov Septicæmia of Brain	10	Dea		Dr. Jones
639	Booker	Lewis	52	M	B	1		Living	Living	Living		Day laborer Aug Carbunkle	52			Dr. Dorset
645	Woodard	A. B.	38	M	B	1		Pharyngitis	Pharyngitis	Pharyngitis		Carbunkle March Consumption	15			Dr. Biddle
665	Rivers	Lalla	50	F	B	1		Living	Living	Living		Keeping house April Unknown	50			Dr. Pillow
668	Farris	Elizabeth	78	F	B	1		Living	Living	Living		Jan Consumption	68			Dr. McFarson
668	Adams	Charley	19	M	B	1		Living	Living	Living		Day laborer March Unknown	19			
691	Beatty	J. P.	27	M	B	1		Indiana Ky	Ky	Ky		Lawyer Nov Paralysis of Brain	1	Indiana		Dr. Biddle
696	Boon	Allie	3	F	B	1		Living	Living	Living		May Septicæmia	3			Dr. Biddle
701	Webster	Mahaly	10	F	B	1		Living	Living	Living		At school Dec Consumption	10			Dr. Dickson
705	Malley	Infant	4	M	B	1		Living	Living	Living		Sept Pharyngitis	4			Dr. Biddle
707	Whittaker	Infant	4	M	B	1		Living	Living	Living		Feb Pharyngitis	4			
706	Allen	Harriet	46	F	B	1		Mid	Mid	Mid		Mid Wife June Dropsy	60			Dr. Sharber
719	Hunt	Ann	22	F	B	1		Living	Living	Living		Boarder Nov Septicæmia	22			Dr. Pillow

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 the enumeration district, to which the deceased belonged, resided June 1, 1880, out of the enumeration district, as follows:
Number of the case in the case 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 case in the case reported above. Place where the death occurred.
Town. County. State.

REMARKS.

Note A.—The Census Year begins July 1, 1879, and ends May 31, 1880.
 Note B.—In making entries in columns 9 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 Col. 1, in the County of Maury, State of Tenn.

Enumerator. 1-6

Schedule 1. - DECEASED PERSONS.																
Name of the person deceased.																
Age at death.																
Sex.																
Color.																
Married.																
Divorced.																
Place of birth of this person, naming the State or Territory of the U.S., or of the country, if foreign birth.																
Where was the father of this person born? As in column 10.																
Where was the mother of this person born? As in column 11.																
Profession, occupation or Trade.																
Not to be asked in respect to persons under 10 years of age.																
The month in which the person died.																
Disease or cause of death.																
If the disease was not contracted in place of death, state the place.																
Name of attending Physician.																
How long a resident of the county? If less than six months, state months and days.																
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
Blk Susan	2	F	B	1				Tenn.			July	3	Old age		Harrison	
Vaughn Matthew	81	M	W	1				Tenn.			Barber	Nov.	Old age		Hawley	
Walker March	34	M	B	1				Tenn.			Barber	Nov.	Old age		Hawley	
Counts John	28	M	B	1				Tenn.			Farmer	May	Malarial fever		Harrison	
Cox Thornton	70	M	B	1				Tenn.			Farmer	March	Heart Disease		Hawley	
Earle Laura	27	F	B	1				Tenn.			Farmer	March	Tubercular Consumption		Hawley	
Fitchville Oskar G.	6	M	W	1				Tenn.				Nov.	Typhoid fever		Bible	
Gantt Amos	30	M	B	1				Tenn.				Sept.	Tubercular Consumption		Hawley	
Gordon Rebecca	44	F	B	1				Tenn.			Sept.	Tubercular Consumption		Hawley		
Goulding John	47	M	W	1				Tenn.			Sept.	Disease of the liver		Cox		
Guise John	35	M	W	1				Tenn.			Sept.	Disease of the liver		Cox		
Hyer Sarah E.	39	F	W	1				Tenn.			Sept.	Tubercular Consumption		Hawley		
Kamar Belle	100	F	W	1				Tenn.			Sept.	Diphtheria		Hawley		
Lamy Mary Ann	24	F	W	1				Tenn.			Public protestant	Sept.	Typhoid fever		Hawley	
McGowan Austin	4	M	W	1				Tenn.			Oct.	Typho-malarial fever		Cox		

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.

Page No.

Supervisor's Dist. No.

Enumeration Dist. No.

[7-223]

Note A.—The Census Year begins June 1, 1870, and ends May 31, 1880.

Note B.—In making entries in columns 9, 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 *5th Civil District*, in the County of *Madison*, State of *Tennessee*. *John B. Jamillors*—

Enumerator. *11*

Name of the person deceased.	Personal Description.	What was the civil condition of the person who died?	Place of birth of this person, naming the State or Territory of the U. S., or the country, if born abroad.	Where was the Father of this person born? As in column 10.	Where was the Mother of this person born? As in column 11.	Profession, Occupation or Trade.	The month in which the person died.	Place or cause of death.	Age at death.	If the disease was not contracted at place of death, state the place.	Name of attending Physician.
17 Jordan, Marshall	88 M B	/	Virginia	Indiana	Indiana	Seamstress	June	Flux	40		Dr. Jamison
21 Thompson, Hannah	80 F B	/	Virginia	Virginia	Virginia	Washer	Aug	Acute Rheumatism	40 or 50		Dr. Jamison
26 Cherry, Celia	70 F B	/	Tennessee	Georgia	Georgia	None	March	Croup	44		Dr. Jamison
24 Jones, Maggie	12 F B	/	Unknown	Unknown	Unknown	None	Jan	Diphtheria	1		Dr. Jamison
26 Smith, Mitty	20 M B	/	Georgia	Georgia	Georgia	None	Aug	Scarlet Fever	20		Dr. Jamison
50 McCall, Willie	6 M B	/	Tenn	Tenn	Tenn	None	Aug	Scarlet	6		Dr. Jamison
55 Wright, William	11 M B	/						Scarlet			
62 Chase, Mary L	2 F B	/						Scarlet			
64 McCall, Rachael M	28 F B	/	Carolina	NC	NC	Washer	May	Scarlet	28		Dr. Jamison
77 Shamus, Minerva	65 F B	/	Louisiana	Miss	NC	Washer	Aug	Scarlet	65		Dr. Jamison
80 Miller, Rachael	46 F B	/	Virginia	VA	VA	Washer	Aug	Scarlet	46		Dr. Jamison
111 Anderson, James	7 F B	/	Tenn	Tenn	Tenn	None	Nov	Scarlet	7		Dr. Jamison
114 Collins, Elizabeth	39 F B	/						Scarlet			
146 Roberts, Elizabeth	4 F B	/						Scarlet			
152 Ducker, William	30 M B	/						Scarlet			
158 Miller, Henry	46 F B	/						Scarlet			
174 Hines, Calvin	43 M B	/						Scarlet			
173 McKeown, Mollie	25 F B	/						Scarlet			
179 Lyons, Lillie	1 F B	/						Scarlet			
178 Hingfield, Unnamed	50 M B	/						Scarlet			
177 Davis, Anthony	30 F B	/						Scarlet			
200 Row, Anthony	1 M B	/						Scarlet			
205 Porter, Lucretia	3 F B	/						Scarlet			
210 Cornell, Elizabeth	10 F B	/	Virginia	Virginia	VA	Washer	Aug	Scarlet	10		Dr. Jamison
211 Steel, Nelly	1 F B	/	Tenn	Tenn	Tenn	None	Aug	Scarlet	1		Dr. Jamison
213 Williams, Sarah	47 M B	/	Georgia			Washer	Aug	Scarlet	47		Dr. Jamison
218 Jones, Emily	35 F B	/						Scarlet			
234 Miller, Nelly	15 M B	/	Tenn	Tenn	Tenn	None	March	Scarlet	15		Dr. Jamison
237 Porter, Moley	9 M B	/						Scarlet			
252 Unnamed	30 M B	/						Scarlet			
255 Bail, Laura	33 F B	/						Scarlet			
271 Fowler, John	75 M B	/						Scarlet			
272 Miller, Eugene	1 F B	/						Scarlet			
275 Boland, Annemie	0 M B	/						Scarlet			
277 Bramlet, Laura	30 F B	/						Scarlet			
286 Hendon, Corbett	25 F B	/	Georgia	Virginia	Geo	Washer	Aug	Scarlet	25		Dr. Jamison

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

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

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

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

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

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

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

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

REMARKS.

INSTRUCTIONS.

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

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

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

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

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

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

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

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

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

Number of the line on Schedule 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	Correctly stated		W. P. Harrison	13	not correctly stated	cholera	W. C. Dorsett	25	Not correctly stated		W. P. Harrison
2	Remittent fever & biliousness from dysentery.		W. C. Dorsett	14	cholera	cholera	W. C. Dorsett	26	Correctly stated		W. C. Dorsett
3				15				27			
4	Correctly stated		W. P. Harrison	16				28			
5	Correctly stated		W. P. Harrison	17				29	not correctly stated	cholera	W. P. Harrison
6				18				30			
7	Heart Disease - some		B. J. H. H. H.	19				31	Correctly stated		W. P. Harrison
8	I did not attend the case		W. C. Dorsett	20				32			
9	Correctly stated		W. P. Harrison	21				33			
10				22				34	I do not remember		B. J. H. H. H.
11	Heart Disease - some		B. J. H. H. H.	23	not correctly stated	cholera	W. C. Dorsett	35	Correctly stated		W. C. Dorsett
12	Correctly stated		W. P. Harrison	24	Correctly stated		W. P. Harrison	36	Correctly stated		W. C. Dorsett

Page No.

Supervisor's Dist. No.

Enumeration Dist. No.

Note A.—The Census Year begins June 1, 1870, and ends May 31, 1880.

Note B.—In making entries in columns 9, 10, and 11, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 11, when the letter "D" is to be used.

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

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

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

Mayer

State of Tennessee

by B. Hamilton

Enumerator.

Name of the person deceased.	Sex.	Age.	Married.	What was the civil condition of the person who died?	Place of birth of this person, naming the State or Territory of the U. S., or the country if born here.	Where was this person born?	Where was the mother of this person born?	Profession, Occupation, or Trade.	Not to be asked in respect to persons under 10 years of age.	The month in which the person died.	Disease or cause of death.	How long a resident of the county or township in which he died.	If the disease was not contracted at place of death, state the place.	Name of attending Physician.
371 Halford Minnie	F	10	B	1	Georgia	Virginia	Geo	None	March	Gold	Cholera	17	None	None
308 Porter Andrew	M	10	B	1	Tenn	Tenn	Tenn	None	July	Cholera	Infantile	17	None	None
307 Hemming Caroline	F	10	B	1	Tenn	Tenn	Tenn	None	Sept	Cholera	Infantile	17	None	None
308 Stephens Alexander	M	10	B	1	Geo	N.C.	N.C.	None	None	None	None	17	None	None
323 Cunningham Jennie	F	10	B	1	Ala	Ala	Ala	None	August	Tea	Theng	17	None	None
330 Bentley Tennessee	M	10	B	1	Tenn	Tenn	Tenn	None	Sept	Cholera	Infantile	17	None	None
346 Kelsae Beulah	F	10	B	1	Tenn	Tenn	Tenn	None	None	None	None	17	None	None
350 Webster Alice	F	10	B	1	None	None	None	None	None	None	None	17	None	None
354 Jones Not Named	M	10	B	1	None	None	None	None	None	None	None	17	None	None
350 K. Sherborn Barbara	F	10	B	1	Georgia	None	None	None	None	None	None	17	None	None
360 Rogers Susan	F	10	B	1	Tenn	Tenn	Tenn	None	None	None	None	17	None	None
370 Miller Charley	M	10	B	1	None	None	None	None	None	None	None	17	None	None
389 Johnston William	M	10	B	1	None	None	None	None	None	None	None	17	None	None
406 Jones Martha	F	10	B	1	None	None	None	None	None	None	None	17	None	None
427 Smith William	M	10	B	1	None	None	None	None	None	None	None	17	None	None
496 Lynum Annamie	F	10	B	1	None	None	None	None	None	None	None	17	None	None
448 Crowley Samuel	M	10	B	1	None	None	None	None	None	None	None	17	None	None
535 Zollicoffer Mary	F	10	B	1	None	None	None	None	None	None	None	17	None	None
586 White Sarah	F	10	B	1	Tenn	Tenn	Tenn	None	None	None	None	17	None	None
594 Daniel Lewis	M	10	B	1	None	None	None	None	None	None	None	17	None	None
William Geo W	M	10	B	1	None	None	None	None	None	None	None	17	None	None
Thom Mary	F	10	B	1	Tenn	Tenn	Tenn	None	None	None	None	17	None	None
Black Mary	F	10	B	1	Tenn	Tenn	Tenn	None	None	None	None	17	None	None
Nulty Sallie	F	10	B	1	Tenn	Tenn	Tenn	None	None	None	None	17	None	None

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 included 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 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 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.

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 diarrhea, acute and chronic rheumatism. Report cerebro-spinal

meningitis as cerebro-spinal fever. Do not report as the cause of death delirium, 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, he 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 Censuses, 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 to which this case is reported.	CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN	Number of the line on Schedule to which this case is reported.	CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN
	Primary.	Immediate.			Primary.	Immediate.	
1				13	Subercular	Laryngitis	H. C. Broun, M.D.
2				14	Correctly stated		H. C. Broun, M.D.
3	Too Early Meningitis	Same	H. C. Broun, M.D.	15	Correctly stated		H. C. Broun, M.D.
4	Meningitis		H. C. Broun, M.D.	16			
5	Never struck the car in any way		H. C. Broun, M.D.	17			
6				18			
7				19			
8	Acute Pericarditis	Hemorrhage	H. C. Broun, M.D.	20			
9	Correctly stated		H. C. Broun, M.D.	21			
10	Correctly stated		H. C. Broun, M.D.	22			
11				23			
12	Heart Failure	Same	H. C. Broun, M.D.	24			

Page No.

Supervisor's Dist: No. 3
Enumeration Dist: No. 165

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 _____

State of *Mass*

Enumerator

Name of the person deceased.	Age at death.	Sex.	Color.	Married.	What was the civil condition of the person who died?	Place of birth of the person, naming the State or Territory of the U. S. or the country, if of foreign birth.	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 which first arrived.	If the disease was not contracted in place of death, state the place.	Name of attending Physician.
							Father of this person born? As in column 10.	Mother of this person born? As in column 11.						
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.
Marion Hill	26	F	B	/		Tennessee	Tennessee	Tennessee	Of Home		Consumption	20		Dr. P. H. Joyce
James Hill	11	F	B	/		Tennessee	Tennessee	Tennessee			Consumption	11		P. H. Joyce
David Luther Lee	6	M	W	/		Tennessee	Tennessee	Tennessee						
Thomas E. Lee	20	M	B	/		Tennessee	Tennessee	Tennessee						
John A. Lee	7	M	B	/		Tennessee	Tennessee	Tennessee						
Augustus Lee	1	F	W	/		Tennessee	Tennessee	Tennessee						
E. Lee	1	M	B	/		Tennessee	Tennessee	Tennessee						
Frank Lee	3	F	B	/		Tennessee	Tennessee	Tennessee						
Frank Lee	12	M	B	/		Tennessee	Tennessee	Tennessee						
Sam Lee	11	M	B	/		Tennessee	Tennessee	Tennessee						
Mary Lee	9	F	B	/		Tennessee	Tennessee	Tennessee						
William Lee	13	M	B	/		Tennessee	Tennessee	Tennessee						
Armstrong Lee	60	F	B	/		Tennessee	Tennessee	Tennessee						
Frederick Lee	76	F	B	/		Tennessee	Tennessee	Tennessee						
Frederick Lee	4	M	B	/		Tennessee	Tennessee	Tennessee						
Kellogg Lee	4	M	B	/		Tennessee	Tennessee	Tennessee						

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:

Number of the
line upon
which the case
is reported

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

Town	County	Date upon which the case is reported	Town	County	State

Number of the line upon which the case is reported

Place where the death occurred

County	State
--------	-------

REMARKS

11) This child was born Deaf. The supposed cause is that the mother worked to long in the night.

Enumeration Dist: No.

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

Note C.—For instructions relative to the use of the letter "D" 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.*)

State of *Quinn*

Enumerator. (5)

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.

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, 1899, out of the enumeration district, as follows:

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

Town, _____ County, _____

Of the deaths reported above, the following occurred out of this enumeration district, though the families to which the deceased belonged were not in this district.

this enumeration district, as follows:

Number of the line upon which the case is reported	Place where the death occurred
1	New York
2	New York
3	New York
4	New York
5	New York
6	New York
7	New York
8	New York
9	New York
10	New York
11	New York
12	New York
13	New York
14	New York
15	New York
16	New York
17	New York
18	New York
19	New York
20	New York
21	New York
22	New York
23	New York
24	New York
25	New York
26	New York
27	New York
28	New York
29	New York
30	New York
31	New York
32	New York
33	New York
34	New York
35	New York
36	New York
37	New York
38	New York
39	New York
40	New York
41	New York
42	New York
43	New York
44	New York
45	New York

REMARKS

Page No.

Supervisor's Dist. No.

Enumeration Dist. No.

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

Note B.—In making entries in columns 9, 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 *1104 Civil Dist.*, in the County of *Mary*, State of *Tennessee*. *A. P. Dean*, Enumerator.

Name of the person deceased.	Sex.	Age.	Color.	Married.	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 the Father of this person born?	Where was the Mother of this person born?	Profession, Occupation or Trade.	The month in which the person died.	Disease or cause of death.	Time between death and burial.	If the disease was not attended at place of death, state the place.	Name of attending Physician.
Maria Hutchinson	13	F	B	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Dr. free	Byss	13	Chas. Winn M.D.	
Bryant, Eliza	50	F	B	1	Tennessee	North Carolina	North Carolina	North Carolina	North Carolina	free	Consumption	Byss	50	Dr. Williams	
Hyacinth, Maria	12	F	B	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Dr. free	Byss	12	Dr. Winn	
Johnson, Ann B.	33	F	W	1	North Carolina	North Carolina	North Carolina	North Carolina	North Carolina	free	Consumption	Byss	10	Dr. Harris & Anst.	
Ridley, Lucy	18	F	B	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	18	Dr. Williams	
Watkins, Maggie	6	F	B	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	6	Nowlin M.D.	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Spurley, George	85	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	3	Dr. Nowlin	
Young, John	42	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	34	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee	Tennessee	Tennessee	Tennessee	Tennessee	free	Consumption	Byss	33	Dr. Harris	
Wiley, W. H.	33	M	W	1	Tennessee										

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 leg; 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 differ 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 which this case is reported	CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN	Number of the line which this case is reported	CAUSE OF DEATH		SIGNATURE OF THE ATTENDING PHYSICIAN
	Primary	Immediate			Primary	Immediate	
1	Pneumonia	Dropsy		13			
2	Consumption			14			
3	Dropsy			15			
4	Pneumonia	Pneumonia	W. H. Hunter	16			
5	Consumption			17			
6	Consumption			18			
7	Consumption			19			
8	Consumption			20			
9	Consumption			21			
10	Consumption			22			
11	Consumption			23			
12	Consumption			24			

REMARKS

Some of the physicians are not named in this Census. Other cases not subscribed to by the attending physicians are cases in which they only furnished prescriptions, never seeing the patient. H. P. Gray, Enumerator

Page No. 1

Supervisor's Dist. No. 3
Enumeration Dist. No. 168

[7-222]

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

Note B.—In making entries in columns 9, 10, and 11, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 9, when the letter "D" is to be used.

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

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

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 1st Civil District, in the County of Maury, State of Tennessee, at W. Lewis, Enumerator. 201

Name of the person deceased.	Personal Description. Age, Sex, Color, Height, Weight, Build, Complexion, Eyes, Hair, Teeth, etc.	What was the condition of the person when deceased? Single, Married, Divorced, etc.	NATIVITY. Place of birth of this person, naming the State or Territory, or the Country, if born abroad.	Where was the person when deceased? As in column 9.	What was the cause of death? As in column 10.	Profession, Occupation, or Trade. As in column 11.	The month in which the person died. As in column 12.	Locality of death. As in column 13.	If the disease was not one of the common diseases, name the disease, and its place.	Name of attending Physician.
Long Co. S.	2 M W	/	Tennessee	Do	Do	Sept. Influenza	2	Long Henry		
Long Jeff	9/2 M B	/	"	"	"	March Diphtheria		Long Wash		
Starks J. E.	2 M W	/	"	"	"	June "		Long Henry		
Starks E. J.	29 M W	/	"	"	"	March Consumption		Long Wash		
Starks H. L.	1 1/2 M W	/	"	"	"	Aug. Scurvy	7/2	William J. H.		
Chamley Caroline	18 F W	/	"	"	"	Homeopathic Oct. Fever	18	Harshman Dr.		
Chamley Kelly	40 M B	/	"	"	"	March Sept.	40	Long Henry		
Andrews James	55 M B	/	"	"	"	Sept. Consumption		William J.		
Andrews John	24 M B	/	"	"	"	Feb. Typh. Fever		"		
Chapman John	2 M W	/	"	"	"	May Lung Disease		Long Wash		
Davis J. W.	4 M W	/	"	"	"	March Diphtheria		William Dr.		
Spade H. M.	18 M W	/	"	"	"	Homeopathic Sept. Septicemia	3	Nowlin Dr.		
Anderson Jacob	11 M W	/	"	"	"	May Pneumonia	1/2	"		
Johnson Ann	25 F B	/	"	"	"	Laborem May		"		
Chapman James	35 M W	/	"	"	"	June Consumption		"		
Smith Robt.	37 M W	/	"	"	"	June May		Long Wash		
Stockard Charlotte	96 F	/	Mo. Mo. Mo.	"	"	March Old age	42	Nowlin Dr.		
Stonier Jeff	58 M B	/	"	"	"	Laborem Sept.	51	"		
Stell Louisa	19 F B	/	"	"	"	Sept. Child birth		Wm H Long		
Infant	7 M	/	"	"	"	Sept. Flux		Nowlin Dr.		
Jennings Ned	9/2 M B	/	"	"	"	Oct. Pneumonia	4	Long W.		
West Henry M.	4 M W	/	"	"	"	June Consumption		William Dr.		
Stockard Jeff	1 M B	/	"	"	"	June Consumption		"		
Stell J. M.	7 M B	/	"	"	"	June Consumption		"		
Stell James	6 M W	/	"	"	"	June Consumption		"		
Grimes Mary Ellen	30 F W	/	Tenn.	"	"	Sept. Phthisis pulmonalis		James		
Rates M. W.	37 F B	/	Tenn.	"	"	June Phthisis pulmonalis		Tracy		
Trimmarina	14 F B	/	Tenn.	"	"	Sept. Diphtheria		Long		
Stewart	9/2 M B	/	Tenn.	"	"	Oct. Diphtheria		Hunter		

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 this enumeration district, as follows:

Number of the line upon which the death 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 diarrhea, 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 which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line on which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	Scarlet fever		Wm. H. Williams	13				25			
2	Dysentery		Wm. H. Williams	14				26			
3	Dysentery		Wm. H. Williams	15	Consumption	Consumption	Wm. H. Williams	27			
4	Consumption		Wm. H. Williams	16	Consumption	Consumption	Wm. H. Williams	28			
5	Intestinal hemorrhage		J. H. Williams	17	Old age	Old age	Wm. H. Williams	29			
6	Fever		Wm. H. Williams	18				30			
7	Scarlet fever		Wm. H. Williams	19	Measles	Measles	Wm. H. Williams	31			
8	Measles		J. H. Williams	20				32			
9	Typhoid fever		J. H. Williams	21	Flux	Flux	Wm. H. Williams	33			
10	Measles		J. H. Williams	22	Dysentery	Dysentery	Wm. H. Williams	34			
11	Dysentery		J. H. Williams	23				35			
12	Dysentery		J. H. Williams	24	Rheumatism of heart		J. H. Williams	36			

No.
 Supervisor's Dist. No. 13
 Enumeration Dist. No. 169

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 the Thirteenth Civil District in the County of Monroe, State of Louisiana.
 Enumerator, John H. Long

Name of the person deceased.	Personal Description. (1) Age, (2) Sex, (3) Color, (4) Marital Status, (5) Occupation, (6) Education, (7) Religion, (8) Birthplace, (9) Date of Death, (10) Cause of Death, (11) Name of attending Physician, (12) Place of Burial.	What was the condition of the person, who died? (13) If the disease was not contracted at the place of death, state the place.	Place of birth of the person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the person born? (14) If of foreign birth, state the country.	Where was the person born? (15) If of foreign birth, state the country.	Profession, Occupation or Trade. (16) Not to be filled in, except in cases of persons under 15 years of age.	The month in which the person died.	Disease or cause of death.	Name of attending Physician.	Place of Burial.
John H. Long	18 M B /	None	Texas	Texas	Texas	at home	May	Pneumonia	Wash Long	1
Caroline A. Long	2 F B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	2
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	3
Lena M. Long	11 F B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	4
F. A. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	5
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	6
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	7
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	8
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	9
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	10
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	11
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	12
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	13
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	14
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	15
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	16
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	17
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	18
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	19
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	20
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	21
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	22
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	23
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	24
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	25
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	26
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	27
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	28
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	29
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	30
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	31
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	32
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	33
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	34
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	35
John H. Long	2 M B /	None	Texas	Texas	Texas	at home	April	Consumption	Wash Long	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.
- 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 case, when the case is reported above.

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

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 case, when the case is reported above.

Place where the death occurred.

Town County State.

REMARKS.

Page No. 2
 Supervisor's Dist. No. 3
 Enumeration Dist. No. 164

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 the County of Madison, State of Tennessee.

Enumerator. L

Name of the person deceased.	Personal Description: (Gender, Age, Color, Marital Status, etc.)	What was the condition of the person who died?	Place of birth of this person, naming the State or Territory of the U.S., or the country, if of foreign birth.	Where was the Father of this person born? As in column 10.	Where was the Mother of this person born? As in column 11.	Profession, Occupation or Trade.	The month in which the person died.	Disease or cause of death.	If the disease was not transmittable, state the place.	Name of attending Physician.
<u>Annie Sharp</u>	<u>3 F W</u>	<u>1</u>	<u>Tenn.</u>			<u>Washing</u>	<u>May</u>	<u>Pneumonia</u>		<u>Williams</u>
<u>Lyker Eden</u>	<u>55 M B</u>	<u>1</u>	<u>Tenn.</u>			<u>Washing</u>	<u>Oct</u>	<u>Typhoid</u>		<u>Long</u>
<u>Winnott Sarah</u>	<u>18 F B</u>	<u>1</u>	<u>Tenn.</u>			<u>Washing</u>	<u>Feb</u>	<u>Pneumonia</u>		<u>Williams</u>
<u>Lucas Mary</u>	<u>40 F W</u>	<u>1</u>	<u>Tenn.</u>			<u>House wife</u>	<u>Sept</u>	<u>Pneumonia</u>		<u>Long</u>
<u>Edison Wells</u>	<u>35 M B</u>	<u>1</u>	<u>Tenn.</u>			<u>Farmer</u>	<u>Sept</u>	<u>Typhoid</u>		<u>Long</u>
<u>Gibbs John</u>	<u>40 M B</u>	<u>1</u>	<u>Tenn.</u>				<u>May</u>	<u>Typhoid</u>		<u>Long</u>
<u>Hall Wm W.</u>	<u>40 M B</u>	<u>1</u>	<u>Tenn.</u>				<u>May</u>	<u>Meningitis</u>		<u>Williams</u>
<u>Jordan Eugene</u>	<u>30 M B</u>	<u>1</u>	<u>Tenn.</u>				<u>March</u>	<u>Pneumonia</u>		<u>Williams</u>
	<u>40 M B</u>	<u>1</u>	<u>Tenn.</u>				<u>Aug</u>	<u>Diarrhea</u>		<u>Williams</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 included in parentheses, thus: Age (25), meaning that the best estimate of the age that can be given is 25 years.

If 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 death is reported above. Place where the family of the deceased resided June 1, 1880.

Town. County. State.

If 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 death is reported above. Place where the death occurred.

Town. County. State.

REMARKS.

Page No.

Supervisor's Dist: No. 3

Enumeration Dist: No. 179

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.)

204

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880; enumerated by me in the 14th District, in the County of Maury, State of Tennessee. J. F. Mitchell, Enumerator.

annuatoe.																
Name of the person deceased.	Sex.	Age.	Married.	What was the condition of the person who died?	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the father of this person born?	Where was the mother of this person born?	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.				
John Scott	m	19	B	/	Tenn.	Tenn.	Tenn.	Farmer	na	Typhoid Fever	home	Nichols, L. G. & Co.				
John Lee	m	2	B	/	Tenn.	Tenn.	Tenn.		Sept.	Consumption	home	Gray, L.				
Jackson Emma	f	24	B	/	Tenn.	Alabama	Tenn.	Farmer	July	Consumption	home	Nichols, L. G. & Co.				
Andrew	m	1	B	/	Tenn.	Virginia	Tenn.		Oct.	Cutaneous	home	Bingham, L. G. & Co.				
Marion Harvey	m	12	B	/	Tenn.	Tenn.	Tenn.		July	Scarlet fever	home	Gray, L.				
Wagon Addison	m	35	B	/	Tenn.	Virginia	Tenn.	Farmer	Aug.	Scrophulous	home	Nichols, L. G. & Co.				
Will Harvey	m	2	B	/	Tenn.	Tenn.	Tenn.		Aug.	Diphtheria	home	Nichols, L. G. & Co.				
Williams Mary	f	8	B	/	Tenn.	Georgia	Tenn.		March	Scrophulous	home	Fain, L.				
Ways Manda	f	21	B	/	Tenn.	Tenn.	Tenn.	Laborer	Oct.	Consumption	home	Nichols, L. G. & Co.				
Pullen Sarah	f	20	B	/	Tenn.	Tenn.	Tenn.	Keppinghouse	Nov	Consumption	home	Gray, L.				
Lowell George	m	3	B	/	Tenn.	Tenn.	Tenn.		Nov	Diphtheria	home	Gray, L.				
Grayhorn Hannah	f	64	B	/	Virginia	Virginia	Virginia	Keppinghouse	Jan	Accident	home	Gray, L.				
Reilly Addie	f	2	B	/	Tenn.	Tenn.	Tenn.		March	Measles	home	Gray, L.				
John Lizzie	f	2	B	/	Tenn.	Tenn.	Tenn.		May	Keppinghouse	home	Gray, L.				
Strickland Effie	f	50	B	/	Tenn.	Virginia	Keppinghouse	Nov		Heart disease	home					
William	m	23	B	/	Tenn.	Tenn.	Tenn.	Farmer	August	Bell's Fever	home	Fain, Nichols, L. G. & Co.				
Johnson John	m	1	B	/	Tenn.	Virginia	Tenn.		Nov	Measles	home	Nichols, L. G. & Co.				
Johnson Mary	f	1	B	/	Tenn.	Tenn.	Tenn.		May	Diphtheria	home	Shedden, L.				
White Bessie	f	3	B	/	Tenn.	Tenn.	Tenn.		Dec.	Diphtheria	home	Shedden, L.				
Dale Mattie	f	9	B	/	Tenn.	Tenn.	Tenn.		Sept.	Diphtheria	home	Shedden, L.				
Kenyon Annie	f	32	B	/	Tenn.	Virginia	Tenn.	Keppinghouse	July	Consumption	home	Gray, L. G. & Co.				
Richardson Elizabeth	f	18	B	/	Virginia	Virginia	Virginia	Laborer	April	Consumption	home	Fain, L. G. & Co.				
Scott Mattie	f	32	B	/	Tenn.	Virginia	Tenn.	Keppinghouse	March	Consumption	home	Fain, L. G. & Co.				
Grayson	m	7	B	/	Tenn.	Tenn.	Tenn.		Aug.	Diphtheria	home	Fain, L. G. & Co.				
Porter Henry	m	2	B	/	Tenn.	Tenn.	Tenn.		Aug.	Spasms	home	Gray, L.				
Yamner (Infant)	m	10 days	B	/	Tenn.	Virginia	Tenn.		Aug.	Spasms	home	Gray, L.				
Willis James	m	65	B	/	Virginia	Virginia	Virginia	Farmer	June	Heart disease	home	Gray, L. G. & Co.				
Miller A.	m	29	B	/	Tenn.	Tenn.	Tenn.	Carpenter	April	Typhoid fever	home	Gray, L. G. & Co.				
Wolter Martha	f	30	B	/	Tenn.	Tenn.	Tenn.	Keppinghouse	April	Consumption	home	Nichols, L. G. & Co.				
Allen	m	40	B	/	Tenn.	Tenn.	Tenn.		May	Still born	home	Shedden, L.				
Cotman Dora	f	5	B	/	Tenn.	Tenn.	Tenn.		Sept.	Diphtheria	home	Fain, L.				
Hall Missie	f	8	B	/	Tenn.	Tenn.	Tenn.		Oct.	Diphtheria	home	Gray, L.				
Choate Margaret	f	7	B	/	Tenn.	Tenn.	Tenn.		May	Measles	home	Gray, L.				
Mary Jane	f	20	B	/	Tenn.	Tenn.	Tenn.		June	Cholera infant.	home	Harden				
Coff Charles	m	35	B	/	Tenn.	Tenn.	Tenn.	Farmer	May	Measles	home	Fain, L.				
Coff Charles	m	44	B	/	Tenn.	Tenn.	Tenn.		Sept.	Typhoid fever	home	Fain, L.				
Finch	m	40	B	/	Tenn.	Tenn.	Tenn.	Housewife		Hemorrhage	home	Harden				

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

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

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

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

Of the deaths reported above, the following occurred in this enumeration district, though the families to which the deceased belonged, resided June 1, 1880, out of 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 statements 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	Small Pox		E. S. Nichols	13				25			
2	Cholera Inf.		E. M. Gray	14	Whooping Cough	Pneumonia	J. M. Gray	26			
3	Phthisis		B. J. Shallen	15				27			
4	Cutting Death		Jack Bingham	16				28			
5				17				29			
6	Stomach Dropsy		E. S. Nichols	18	Romellon's Dropsy	Type	M. Shadden	30	Typhoid Fever		H. K. Shallen
7	Dysentery		E. S. Nichols	19	Leptemia	Polypus of heart	M. K. Shadden	31	Syphilis		E. S. Nichols
8	Tubercular		C. P. Hain	20	Delirium		M. K. Shadden	32			
9	Phthisis		E. S. Nichols	21	Consumption		E. M. Gray	33			
10	Consumption		E. M. Gray	22	Tubercular		C. P. Hain	34			
11	Dysentery		E. M. Gray	23	Pneumonia			35			
12	Phthisis		C. P. Hain	24	Artemia		C. P. Hain	36			

Page No. 1

Supervisor's Dist: No. 3

Enumeration Dist: No. 17

[7-222]

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 this 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 15th District in the County of Murray State of Tennessee TN Union

Enumerator.

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
Name of the person deceased.	Age at last birthday, or under 1 year, give months in this column. If 1 year, give months in this column. If 2 years, give months in this column. If 3 years, give months in this column. If 4 years, give months in this column. If 5 years, give months in this column. If 6 years, give months in this column. If 7 years, give months in this column. If 8 years, give months in this column. If 9 years, give months in this column. If 10 years, give months in this column. If 11 years, give months in this column. If 12 years, give months in this column. If 13 years, give months in this column. If 14 years, give months in this column. If 15 years, give months in this column. If 16 years, give months in this column. If 17 years, give months in this column. If 18 years, give months in this column. If 19 years, give months in this column. If 20 years, give months in this column. If 21 years, give months in this column. If 22 years, give months in this column. If 23 years, give months in this column. If 24 years, give months in this column. If 25 years, give months in this column. If 26 years, give months in this column. If 27 years, give months in this column. If 28 years, give months in this column. If 29 years, give months in this column. If 30 years, give months in this column. If 31 years, give months in this column. If 32 years, give months in this column. If 33 years, give months in this column. If 34 years, give months in this column. If 35 years, give months in this column. If 36 years, give months in this column. If 37 years, give months in this column. If 38 years, give months in this column. If 39 years, give months in this column. If 40 years, give months in this column. If 41 years, give months in this column. If 42 years, give months in this column. If 43 years, give months in this column. If 44 years, give months in this column. If 45 years, give months in this column. If 46 years, give months in this column. If 47 years, give months in this column. If 48 years, give months in this column. If 49 years, give months in this column. If 50 years, give months in this column. If 51 years, give months in this column. If 52 years, give months in this column. If 53 years, give months in this column. If 54 years, give months in this column. If 55 years, give months in this column. If 56 years, give months in this column. If 57 years, give months in this column. If 58 years, give months in this column. If 59 years, give months in this column. If 60 years, give months in this column. If 61 years, give months in this column. If 62 years, give months in this column. If 63 years, give months in this column. If 64 years, give months in this column. If 65 years, give months in this column. If 66 years, give months in this column. If 67 years, give months in this column. If 68 years, give months in this column. If 69 years, give months in this column. If 70 years, give months in this column. If 71 years, give months in this column. If 72 years, give months in this column. If 73 years, give months in this column. If 74 years, give months in this column. If 75 years, give months in this column. If 76 years, give months in this column. If 77 years, give months in this column. If 78 years, give months in this column. If 79 years, give months in this column. If 80 years, give months in this column. If 81 years, give months in this column. If 82 years, give months in this column. If 83 years, give months in this column. If 84 years, give months in this column. If 85 years, give months in this column. If 86 years, give months in this column. If 87 years, give months in this column. If 88 years, give months in this column. If 89 years, give months in this column. If 90 years, give months in this column. If 91 years, give months in this column. If 92 years, give months in this column. If 93 years, give months in this column. If 94 years, give months in this column. If 95 years, give months in this column. If 96 years, give months in this column. If 97 years, give months in this column. If 98 years, give months in this column. If 99 years, give months in this column. If 100 years, give months in this column.	Sex—Male (M) or Female (F).	Color—White (W), Black (B), Mulatto (M), Indian (I), Other (O).	Single (S), Married (M), Widowed (W), Divorced (D).	Place of birth of this person, naming the State or Territory of the U. S. or the country if not known.	Where was this person born? As in column 9.	Where was this person born? As in column 10.	Profession, occupation or trade.	The month in which the person died.	Disease or cause of death.	How long a resident of the county in which he died, state month in which he came to this county.	If the disease was not contracted within the county, state the place.	Name of attending Physician.			
22 Donaldson H. H.	67. 4 M	/			Kentucky	Virginia	Wt.	Kept house	July	Lymph Liver	40		Bingham J.			
23 Donaldson J. H.	30 M W	/			Tennessee	Tenn.	Wt.	Farmer	July	Lymph Liver	30		Jefferson A. H.			
29 Franklin C. A.	15 M W	/			Tennessee	Tenn.	Wt.		Oct	Stroke of heart	12		Long Wash			
29 Franklin C. A.	5 7 M	/			Tennessee	Tenn.	Wt.		July	Diphtheria	5		King R. B.			
37 Clark David L.	35 M W	/			Tennessee	Tenn.	Wt.		Mar	Hoies	10		None			
65 Perry M. J.	30 M W	/			Tennessee	Tenn.	Wt.	Farmer	July	Lymph Liver	30		Jefferson A. H.			
68 Brooks W. A.	9 7 M	/			Tennessee	Tenn.	Wt.		July	Diphtheria	8		Jefferson A. H.			
68 Brooks Charles	7 7 M	/			Tenn.	Tenn.	Wt.		Mar	Diphtheria	12		Jefferson A. H.			
71 Allen Sam. C.	4 7 M	/			Tennessee	Tenn.	Wt.		Sept	Diphtheria	4		Jefferson A. H.			
83 Sharp Ellen	6 7 M	/			Tennessee	Tenn.	Wt.		Sept	Diphtheria	6		Jefferson A. H.			
95 Bradford John	8 M W	/			Tennessee	Tenn.	Wt.		Mar	Diphtheria	5		Jefferson A. H.			
144 Gates John P.	3 7 M	/			Tennessee	Tenn.	Wt.		Aug	Diphtheria	3		Williams			
112 Greenway R. A.	66 7 M	/			Tennessee	Tenn.	Wt.	None	Mar	Cancer	66		King R. B.			
112 Greenway R. A.	5 7 M	/			Tennessee	Tenn.	Wt.		Sept	Diphtheria	5		Jefferson A. H.			
75 Jones R. B.	3 7 M	/			Tenn.	Tenn.	Wt.		Oct	Diphtheria	3		Jefferson A. H.			
64 Baker A. C.	7 4 M	/			Tenn.	Tenn.	Wt.		Mar	Lymph Liver			Jefferson A. H.			
64 Baker A. C.	2 M	/			Tennessee	Tenn.	Wt.		Sept	Croup & Croup			Jefferson A. H.			
64 Baker A. C.	1 M	/			Tenn.	Tenn.	Wt.		July	Hepatic Cough			Jefferson A. H.			
64 Baker A. C.	4 7 M	/			Tenn.	Tenn.	Wt.		Sept	Diphtheria			Jefferson A. H.			
64 Baker A. C.	7 M	/			Tenn.	Tenn.	Wt.		Sept	Diphtheria			Jefferson A. H.			

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.

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 "stillbirths," 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 diarrhea, 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.	Number of the line on Schedule upon which this case is reported.
	Primary.	Immediate.						Primary.	Immediate.		
1				13	Correct	W B Hughes	25				37
2	Typho Malarial		A L Smith	14	Correct		26				38
3				15			27				39
4	Correct		W B Hughes	16			28				40
5				17			29				41
6	Typho Malarial		A L Smith	18			30				42
7	Correct			19			31				43
8	Correct			20			32				44
9	Correct			21			33				45
10	Correct			22			34				46
11	Correct			23			35				47
12				24			36				48

Page No. 2
 Supervisor's Dist. No. B
 Enumeration Dist. No. 1712

(7-222)

Note A.—The Census Year begins June 1, 1879, and ends May 31, 1880.
 Note B.—In making entries in columns 12, 13, and 14, an affirmative mark only will be used, thus /, except in the case of Divorced persons, column 12, 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.)

206

SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in 16th Civil Dist, in the County of Mary, State of Indiana

Enumerator.

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
168	Carroll, Robt	25	M	1				Pennepu	Penn	Penn	Farmer	Boy	Typhoid Fever	35		Bingham J. P.
168	Muggie	2	M	1				Pennepu	Penn	Penn				9		"
168	Perry, Margaret	39	F	1				"	va	"			Mur. Apoplexy	39		None
179	Apple, Sammi	61	F	1				"	va	va			June Congestion of Lungs	68		Lefkovich A. L.
189	Atchey, James B.	3	M	1				Pennepu	Lin	Lin			Dec. Diphtheria	3		Bingham J. P.
211	Peck, William	53	M	1				Pennepu	Lin	Lin	Capt. Wood		Dec. Diphtheria	53		Wright, R. L.
238	Leff, Infant	30	F	13				Pennepu	Lin	Lin			May Still Born	0		None
243	Lane, Julia	4	F	1				Pennepu	Lin	Lin			Oct. Diphtheria	4		Bingham J. P.
249	Rodson, Rachel	7	F	1				Pennepu	Lin	Lin			Sept. Diphtheria	7		Bingham J. P.
184	Pate, Olive	114	F	13				Lincoln	Not known	Not known	None		Mar. Diphtheria	69		None
254	Kennedy, Francis	3	M	13				Pennepu	Lin	Lin			Sept. Diphtheria	3		Bingham J. P.
254	Kennedy, Walter	2	M	13				Pennepu	Lin	Lin			Sept. Diphtheria	2		Bingham J. P.
258	Koyle, Missy	8	F	13				Pennepu	Lin	Lin			Oct. Diphtheria	8		Lefkovich A. L.
258	Missy	3	F	13				Pennepu	Lin	Lin			Oct. Diphtheria	3		Lefkovich A. L.

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

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

Number of the line upon which the case is reported above.	Place where the family of the deceased resided June 1, 1880.		
	Town.	County.	State.
1	2 nd Civil Dist	Mary	Lin
2	2 nd Civil Dist	Mary	Lin

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

Number of the line upon which the case is reported above.	Place where the death occurred.		
	Town.	County.	State.
1	2 nd Civil Dist	Mary	Lin
2	2 nd Civil Dist	Mary	Lin

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 in which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line in which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.	Number of the line in which this case is reported.	CAUSE OF DEATH.		SIGNATURE OF THE ATTENDING PHYSICIAN.
	Primary.	Immediate.			Primary.	Immediate.			Primary.	Immediate.	
1	<i>Epilepsy Malumal</i>			13	<i>Cancer</i>		<i>A. S. Lythrick</i>	25			
2	<i>Epilepsy Malumal</i>			14	<i>Cancer</i>		<i>A. S. Lythrick</i>	26			
3				15				27			
4	<i>Cancer</i>		<i>A. S. Lythrick</i>	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. 3

Enumeration Dist. No. 172

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, 1886, enumerated by me in

, in the County of

Maury, State of Tennessee

A. A. Barker

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 included 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, 1900, in this enumeration district, as follows:

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

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

INSTRUCTIONS.

The important point in this Schedule is the question in column 1, 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.

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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.

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