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Supervisor's Dist. No. 3

Enumeration Dist. No. 174

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

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

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

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

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SCHEDULE 5.—Persons who DIED during the Year ending May 31, 1880, enumerated by me in District No. 1, in the County of Monroe, State of Mississippi, J. N. Taylor

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 death.	Sex.	Color.	Married.	Divorced.	Widowed.	Single.	What was the condition of the person when he died?	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	Where was the father of this person born? As in column 9.	Where was the mother of this person born? As in column 10.	Profession, Occupation or Trade.	The month in which the person died.	Disease or cause of death.	Time when the death occurred, stating the month and day.	If the disease was not contracted at place of death, state the place.	Name of attending Physician.																											
16	Corrus Liggins, Jr.	1/2	F	M	/					Dem	Dem	Dem		Sept	Monrigitus	8 1/2		Dr. James																												
17	Belle E. Liggins	1/2	F	M	/					Dem	Dem	Dem		Apr	Diarrhoea	1/2		None																												
18	Thaddeus Liggins	1	M	M	/					Dem	Dem	Dem		Nov	Diarrhoea	6		None																												
	Melrose Sims	3 1/2	F	M	/					Dem	Dem	Dem	Next Home Rec.	Dec	Gravelly	8		Dr. N. Taylor																												
	Infant	3 1/2	F	M	/					Dem	Dem	Dem	Dec			3 1/2		None																												
	Infant	3 1/2	F	M	/					Dem	Dem	Dem				3 1/2		None																												
53	Silver Tooth M. E.	42	F	M	/					Dem	Dem	Dem	Next Home Rec.	Apr	Consumption	8		Dr. N. Taylor																												
54	Elizabeth M. Smith	1/2	F	M	/					Dem	Dem	Dem	Oct		Consumption	6		Dr. James																												
55	Elizabeth M. Smith	1/2	F	M	/					Dem	Dem	Dem	Oct		Consumption	6		Dr. James																												
56	Newell M. Smith	74	M	M	/					Ohio			None	Dec	Heart Disease	1		Dr. James																												
57	Samuel B. Smith	70	F	M	/								Dec	Old age	8		None																													
58	Samuel B. Smith	70	F	M	/					Dem	Dem	Dem	Throat	Nov	Consumption	8		Dr. N. Taylor																												
59	Mattew. Smith	20	F	M	/					Dem	Dem	Dem	Consumption	Aug	Consumption	8		None																												
60	M. Smith	18	F	M	/					Dem	Dem	Dem	at Home	Nov	Consumption	8		None																												
61	Phoebe Smith	18	F	M	/					Dem	Dem	Dem	at Home	Aug	Diphtheria	8		Dr. James																												
X	Army Benjamin	3 1/2	M	M	/					Dem	Dem	Dem	Next Home Rec.	Nov	Heart Disease	8		Dr. N. Taylor																												
62	Infant 713 names	-	F	M	/					Dem	Dem	Dem	Next Home Rec.	Sept	Still born	8		Dr. N. Taylor																												

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 (55), meaning that the best estimate of the age that can be given is 55 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.

Benjamin Army has no family living here.

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Supervisor's Dist. No. 3

Enumeration Dist. No. 175

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

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

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

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

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

State of

in the County of

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
31	Seavally Alice	42	F	W	1			Tenn	Miss Tenn		Jan	Nov	Old age	0	1	Whitfield
29	Seavally John	81	M	W	1			Tenn	Vir Vir		Farmer	Spt	Old age	0	2	Thomasson
39	Black Nancy	30	F	W	1			Ala	Tenn Ala		Washing	Nov	Typhoid fever	0	2	Thomasson
*	Laiken Lila	40	F	W	1			Tenn	S. C. S. C.		Washing	Nov	Shingles	0	2	Thomasson
105	Pallopson Infant	3	M	W	1			Tenn	Tenn Tenn			July	Fever	0	2	Thomasson
132	Wathcoat Mary	2	F	W	1			Tenn	Tenn Tenn			Oct	Scrophula	2	2	Salmon
190	Peaks Milton	62	M	W	1			Tenn	Tenn Tenn					0		None
204	Simkins Billa	15	F	W	1			Tenn	Tenn Tenn		Captn	Nov	Consumption	0		Dance
226	Chapman Sam	6	M	W	1			Tenn	Tenn Tenn			Oct	Scrophula	5	6	Harman
238	Eggfelter Infant	4	M	W	1			Tenn	Tenn Tenn			Sim	Stillborn	0		Laibor
248	Claxton John	2	M	W	1			Tenn	Tenn Tenn			July	Scrophula	0		None
(Additional to Monroe Co from Supplemental Schedules)																
10	Knights Baby	-	M	W	1			Tenn			3d Tenn E. D. No 90	July	Born Dead	0		
21	Benjamin Tarny	27	M	W	1			Tenn			2d Tenn E. D. No 41	Jan	Pneumonia	3		Daper
22	Parham Jack	1	M	W	1			Tenn			3d Tenn E. D. No 97	Nov	Scalded	0		Art. Parks
23	Alman Emma	25	F	W	1			Tenn			3d Tenn E. D. No 16	Jan	Consumption	0		Ferguson
24	Perez Kidwell	30	M	W	1			Tenn			3d Tenn E. D. No 16	Dec	Unknown	0		None
25	P. Morris Canals	84	F	W	1			Tenn			House-keeper	July	Cerebral meningitis	0		Dance

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

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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.

* No family known in the County.

The physicians say they have blanks sent them in which to give the name of deceased persons. Therefore I did not get them to fill out the blanks.

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, intemperance, or debility, or paralysis of the heart, or sudden death*, in any case, where it is possible to name any definite disease. In reporting suicide name the means, whether cutting of throat, hanging, drowning, shooting, poisoning by opium, arsenic, &c.

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

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

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

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

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

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

Page No.

Supervisor's Dist. No.

Enumeration Dist. No. 176

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 4, 5, 6 & 7 in the County of Moore, State of Tennessee, Thomas J. Shaw

Enumerator.

Number of the family as given in column numbered 1 - Subordinate.		Name of this person deceased.	Sex & Age at death as given in column numbered 3 - Subordinate.	Color as given in column numbered 4 - Subordinate.	Married as given in column numbered 5 - Subordinate.	Divorced as given in column numbered 6 - Subordinate.	Place of birth of the person deceased.	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 con- tracted at place of death, state the place.	Name of attending Physician.		
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
74	McKinney to name of	60 M W	W	/			Tenn	Tenn	Tenn			Noir Debility	0	60		
102	Frattin Charles	60 M W	W	/			Tenn	Tenn	Tenn	Farmer	April	Consumption	60		Dr. Vahlbitt	
106	Allen B M	18 M W	W	/			Kent	Tenn	Tenn	Work on farm	April	Pneumony	18		Dr. Vahlbitt	
109	Goodson Elizabeth	22 F W	W	/			Tenn	Tenn	Tenn	Keeping house	July	Brain fever	22		Dr. Vahlbitt	
129	Waco Julius F	18 F W	W	/			Tenn	Tenn	Tenn	Keeping house	March	Consumption	18		Dr. Vahlbitt	
174	Sawyers Eliza	65 F W	W	/			W.C.	W.C.	W.C.	Keeping house	Feb.	Heart disease	60			
177	Ashby Jane	11 M W	W	/			Tenn	Tenn	Tenn	Work on farm	Feb.	Heart	11			
244	Mc Leo Wm W	20 M W	W	/			Tenn	Tenn	Tenn	Work on farm	Dec.	Ho	20		Dr. Thomson	
265	Shelton M J	57 F W	W	/			Tenn	Tenn	Tenn	Work on farm	Aug	Typhoid fever	57		Dr. Thomson	
277	Francis Martha	88 F W	W	/			Tenn			Work on farm	April	Pneumonia	88			
277	Spencer Rebecca	75 F W	W	/			W.C.			Work on farm	April	Dropsey of heart	50		Dr. Vahlbitt	
PR	Bryson	3 M W	W	/			Tenn.				Aug.	Cholera infant.	0		W. Vahlbitt	

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.

Martha Francis at 88 years old was born in Franklin County but our County of Moore being a new County I made her a resident of it during her life as she did not agree with her father when she was born. She took poison at her son's house on the 11th day of April 1880. Her son sent for Dr. Vahlbitt but he arrived after she died. The Dr. examined the poison & she did not take all she had in her possession and he pronounced it strychnine. She showed no signs of derangement but had often spoken of being in trouble & the wife of a good family and had many good friends. Her son, the child, died at 17. J. 1880, being born the 11th of the same month.

Received August 31 1880

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Supervisor's Dist. No. 3

Enumeration Dist. No. 177

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 177th District, in the County of

(Mono) State of Tennessee

R B Parker

Enumerator.

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.
Name of the person deceased.	Age at last birthday, if under 1 year, state month and day.	Sex.	Color.	White (W), Black (B), Mulatto (M), Indian (I), Chinese (Ch), Japanese (Jp).	Single.	Married.	Divorced (D).	Place of birth of this person, naming the State or Territory, or the U. S., or the country, if born here.	Where was the Father of this person born? As in column 9.	Where was the Mother of this person born? As in column 10.	Profession, Occupation or Trade.	The month in which the person died.	Illness or cause of death.	How long a resident of the enumeration district (State).	If the disease was not contracted at place of death, state the place.	Name of attending Physician.
6 Pardons J B	2 m m	/						Tenn	Tenn	Tenn		March	Influenza	2		McRae
9 Rees John	30 m m	/						Tenn	Tenn	Tenn		June	Debility	0		Corral J R
12 Bullen Mary	52 f m	/						Tenn	Tenn	Tenn	House work	Dec	Phumonia	0		Corral J R
McCarroll Minnie	42 f m	/						Tenn	Tenn	Tenn	House work	Mar	Consumption	0		Hobbs D J
77 Johnson A T	1 m m	/						Tenn	Tenn	Tenn		Nov	Influenza	0		Corral J R
82 McChatt D L	1 m m	/						Tenn	Tenn	Tenn		April	Pneumonia	0		Corral J R
90 Magalen Infant	30 f m	/						Tenn	Tenn	Tenn		May	Still born	0		McRae
111 Orum Elizabeth	39 f m	/						Tenn	Tenn	Tenn	Helping House	July	Pneumonia	0		Corral J R
111 Bestwick Polly	84 f m	/						Tenn	Nb	Nb		July	Pneumonia	0		Corral J R
116 Richardson J B	34 f m	/						Tenn	Nb	Nb	Helping House	March	Pneumonia	0		Corral J R
118 McLaughlin J M	1 f m	/						Tenn	Tenn	Tenn		Sept	Bronchitis	0		McRae
123 Warden Infant	- m m	/						Tenn	Tenn	Tenn		Mar	Still born	0		McRae
135 Reeves Lizzy	26 f m	/						Tenn	Tenn	Tenn	House work	Sept	Consumption	0		Daniel L C
135 Reeves J W	42 m m	/						Tenn	Tenn	Tenn		Nb	Consumption	0		Corral J R
139 Daniel Catharine	33 f m	/						Tenn	Nb	Nb		Oct	Consumption	0		(None)
147 Smith Betty	32 m m	/						Tenn	Tenn	Nb		Sept	Scrophula	0		Bennett
179 Rees Mary	80 f m	/						Nb	Nb	Nb		April	Paralysis	0		McRae
194 Smith Alford	21 m m	/						Tenn	Tenn	Tenn	Farmer	Dec	Consumption	0		Takes A H
223 Brown Infant	45 m m	/						Nb	Nb	Nb	Sailor	Oct	Dyspepsia	0		Daniel B H
236 Sanford R V	9 m m	/						Nb	Nb	Nb		Sept	Consumption	0		
236 Sanford R V	20 m m	/						Nb	Nb	Nb		July	Consumption	0		
236 Bennett Hester	76 m m	/						Nb	Nb	Nb	Farmer	May	Paralysis	0		(None)
261 Holt Infant	- f m	/						Tenn	Tenn	Tenn		Aug	Consumption	0		Daniel B H
271 Stewart Laura	42 f m	/						Tenn	Tenn	Tenn		Mar	Scrophula	0		Daniel B H
PR New Farmer B	40 f m	/						Tenn	Tenn	Tenn		Sept	Scrophula	0		(None)
282 Wise Tom	40 m m	/						Tenn	Tenn	Tenn		May	Pharyngeal Tuberculosis	0		Farrin
PR Dean	8 m B I	/						Tenn	Tenn	Tenn		June	Agitated	0		Whitfield
PR Smith Francis	35 f B	/						Tenn	Tenn	Tenn	House work	May	Scrophula	0		Bennett
PR West Mary	25 f m	/						Tenn	Tenn	Tenn		Feb	Pneumonia	0		

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

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

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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.

20.21 near Lake City Columbia Ala

14 near Mountain Coffee Tenn

REMARKS.

INSTRUCTIONS.

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

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

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

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

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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 mark 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 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				13				25			
2				14			<i>Correctly stated S. E. Damm consulting Physician</i>				
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			<i>Consumption S. E. Damm consulting Physician</i>	36			