

**SCHEDULE 5 - Persons who Died during the Year Ending May 31th 1880, in *Harmony* in the
County of *Somerset*, State of *Maine*, enumerated by me, *Kadarsah L Kerrick*, Enumerator**

Number of the family, as given in Schedule 1	Name of every person deceased	Description			Condition			Nativity			Occupation	Month of Death	Disease	How long Resident	Place of Death	Doctor
		Age	Sex	Color } White, Black, Mulatto, Chinese & Indian	Single	Married	Widowed / Divorced	Place of Birth	Father place of birth	Mother Place of birth						
11	Rollins, Pehabod	81	M	W		M		ME	ME	ME	Farmer	Dec	Heart Disease	21		None
16	Davis, Euncie	78	F	W			W	NH	NH	NH	House keeping	Dec	Cancer in Stomach	53		GF Merrill
22	Dore, Isaiah	57	M	W		M		ME	ME	ME	Farmer	Sept	Eyspepsia	57		Wm McLaughlin
23	Dore, Herbert	7	M	W	S			ME	ME	ME	At School	Sept	Fever	7		GF Merrill
24	Stafford, Rebecca	73	F	W		M		ME	MA	ME	Wife	Jan	Pneumonia	73		Wm McLaughlin
34	Hurd, Henry T	10	M	W	S			ME	ME	ME	At School	Jan	Pneumonia	10		Wm McLaughlin
38	Leavitt, Elie	1m	F	W	S			ME	ME	ME		Apr	Pneumonia	1m		Wm McLaughlin
40	Frost, David A	1	M	W	S			ME	ME	ME		Apr	Diphtheria	1		Wm McLaughlin
47	Conner, Millie J	5	F	W	S			ME	ME	ME		Jan	Diphtheria	5		Wm McLaughlin
49	Peterson, Almond	14	M	W	S			ME	ME	ME	At School	Mar	Diphtheria	14		Wm McLaughlin
	?, Willie M	10	M	W	S			ME	ME	ME	At School	Mar	Diphtheria	10		Jordan of St Albans
	?, Annie T	8	F	W	S			ME	ME	ME	At School	Mar	Diphtheria	8		Jordan of St Albans
	?, Charlie E	7	M	W	S			ME	ME	ME	At School	Mar	Diphtheria	7		Jordan of St Albans
	?, Harry A	3	M	W	S			ME	ME	ME		Mar	Diphtheria	8		Jordan of St Albans
86	Hurd, Isaiah	23	M	W	S			ME	ME	ME	Laborer	Jan	Inflammation of Bowels	23		GF Merrill
99	Ward, Infant	30m	F	W	S			ME	ME	ME		Mar	Diphtheria			Marr of Athens
94	Brurtley, Infant	18 m	M	W	S			ME	ME	ME		Oct	Consumption of Lungs			Wm McLaughlin
102	Langley, Fred S	16	M	W	S			ME	ME	ME	Laborer	May	Lightning	16		Marr of Athens
108	Berry, Lydia A	18	F	W	S			ME	ME	ME	Home	Mar	Consumption of Lungs	18		Wm McLaughlin
118	Smith, Velmes	1m	F	W	S			ME	ME	ME		May	Inflammation of Bowels			None
139	Grand, Suysan	87	F	W			W	ME	ME	ME	House keeping	Mar	Palsey	50		None
140	Richards, Eunice D	6	F	W	S			ME	ME	ME		Dec	Diphtheria	6		Wm McLaughlin
142	Brown, Leonard E	10	M	W	S			ME	ME	ME	At School	Jan	Diphtheria	10		Wm McLaughlin
	?, Harry F	4	M	W	S			ME	ME	ME		Jan	Diphtheria	4		Brown of Athens
	Lord, Hosea	74	M	W		M		ME	ME	ME	Farmer	Feb	Diseases of Brain	74		Wm McLaughlin
160	Kimball, Delilah	57	F	W		M		ME	ME	ME	Wife	Sept	Consumption of Lungs	57		C Foss of Dexter
160	Spaulding, Verritta	43	F	W		M		ME	ME	ME	Wife	Aug	Dropsy	48		GF Merrill
168	Boyd, Cleopa	77	M	W			W	MA	MA	MA	Lawyer	Jan	Luekemenia	60		GF Merrill
181	Clark, Masry	86	F	W		M		ME	ME	ME	Wife	July	Cancer	17		None
194	?, James	90	M	W			W	ME	ME	ME	Farmer	Oct	Paralysis	17		None
PR	Pennell John	22	M	W	S			ME	USA	USA	Farmer	July	McLaughlin & Brown			

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 enumeration district.

2nd 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.

REMARKS

A - 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:

A -
Line #
25
B -
Line #
18

B - Of the deaths reported above, the following occurred out of this enumeration district, but 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
Athens	Somerset	ME

Place where death occurred

Town	County	State
Athens	Somerset	ME

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 Cerebra-spinal

meningitis as cerebra-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.

Line #	Cause of Death		Signature of the Attending Physician	Line #	Cause of Death		Signature of the Attending Physician	Line #	Cause of Death		Signature of the Attending Physician
	Primary	Immediate			Primary	Immediate			Primary	Immediate	
1				13				25		Softening of brain	Wm McLaughlin
2		Carinmua of Stomach	GF Morrill	14				26			
3		Cancer on ?	Wm McLaughlin	15		Tubercle ?	GF Morrill	27		Heart Disease	GF Morrill
4				16				28		Pneumonia	GF Morrill
5		Pneumonia	GF Morrill	17		Scrofulous Hummer	Wm McLaughlin	29			
6		Pneumonia	Wm McLaughlin	18				30			
7				19		Pulmonary Consumption	Wm McLaughlin	31			
8		Diphtheria	Wm McLaughlin	20				32			
9		Diphtheria	Wm McLaughlin	21				33			
10		Diphtheria	Wm McLaughlin	22				34			
11				23		Diphtheria	Wm McLaughlin	35			
12				24		Diphtheria	Wm McLaughlin	36			