

1 Note A - ins June 1, 1879 and ends May 31, 1880  
Note B - : an affirmative mark only will be used, thus /, except in the  
Supervisor's Dist: 1 Divorced persons, column 8, when the letter 'D' is to be used.  
Note C - e entries in column 14, see back of this Schedule.

Enumeration Dist: 169

Note D - y if no Physician was in attendance, thus [None].

**SCHEDULE 5 - Persons who Died during the Year Ending May 31th 1880, in *Norridgewood* in the  
County of *Somerset*, State of *Maine*, enumerated by me, *A W Dunlap*, 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					
1	Dunlap, Jane A	47	F	W		1		MA	MA	MA	Keeping House	Jan	Hernia	16-Feb	Robbins/Brown
6	Packard, Lucius	80	M	W			1	ME	ME	ME	Minister	Mar	Apoplexy	80	Brown
6	Packard, Cynthia	75	F	W		1		ME	ME	ME	Keeping House	July	Consumption	75	Brown
18	Carlton, Nellie	40	F	W		1		ME	ME	ME	Keeping House	Mar	Consumption	40	Brown
	Austin, Amanda	33	F	W		1		ME	ME	ME	Keeping House	Sept	Heart Disease	32	Robbins
17	Dunlap, Dorcas	77	F	W			1	ME	ME	ME	Keeping House	Feb	Plursites	77	Brown
54	Worton, Reuben	60	M	W		1		ME	ME	ME	Farmer	Nov	Heart Disease	60	None
76	Davis, Clara E	78	M	W	1			ME	ME	ME	School	July	Diptheria	18	Moses/Brown
100	Heale, William H	65	M	W		1		ME	ME	ME	Farmer	Oct	Concer	65	Robbins/Brown
100	Andrews, Mark	81	M	W		1		ME	ME	ME	Farmer	July	Heart Disease	20	Robbins/Brown
103	Haynes, Russell S	44	M	W		1		ME				July	Consumption	44	Robbins
118	Porter, Howard	1	M	W	1			MA	MA	ME		Nov	Hemorihage		Brown
136	Morse, N W	80	M	W		1		ME	ME	ME	Farmer	Apr	Puumary	80	Haynes
141	Parker, Florence M	19	F	W	1			ME	ME	ME		Oct	Consumption	19	Stevens
147	Rogers, Lydia	81	F	W			1	ME	ME	ME	Home	Apr	Cancer	81	Robbins/Cisjomng
146	Withee, Cone M	19	F	W	1			ME	ME	ME	Home	May	Consumption	19	Webber
156	Taylor, Betsey	81	F	W			1	ME	ME	ME	Keeping House	Jan	Old Age	81	Robbins
172	Walker, Samuel	55	M	W				ME	ME	ME	Farmer	Mar	Measels		
185	Ressie, Tayler	1	F	W	1			ME	ME	?		June	Measels		
188	Dismore, Sanborn	68	M	W		1		MA	MA	MA	Farmer	Mar	Paralysis		Robbins/Brown
188	Norton, Sarah L	84	F	W			1	ME	MA	MA	Keeping House	Mar	Billous	44	
200	Baker, Alton	16	M	W	1			ME	MA	MA		June	Brain Fever	16	Brown
199	Leavitt, William B	39	M	W		1		ME	ME	ME	Dentist	Oct	Consumption	39	Athens Brown
219	Littlefield, Carrie H				1			ME	MA	ME	Dress Maker		Consumption		Brown
241	Whiting, John	76	M	W		1		ME	MA	ME	Farmer	Feb	Consumption		Brown
269	Sawyer, John K	74	M	W		1		ME	MA	MA	Grocer	Feb	Liver feber	47	Robbins/Brown
	Farnsworth, Susan	88	F	W			1	ME	MA	MA	Keeping House	July	Hip Disease	88	Robbins
281	Marlow, Ida M	19	F	W	1			ME	ME	ME	Home	Mar	Consumption	19	MA Robbins/Brown
286	Cale, Clara G	1	F	W	1			ME	MA	ME		May	Brain Fever	1	Robbins/Brown
286	Cale, Flora N	1 m	F	W	1			ME	MA	ME		Aug	Brain Fever	1 m	Robbins/Brown
289	Robbins, John	86	M	W		1		ME	MA	MA	Farmer	May	Old Age	86	Robbins
47	Holt, Mary W	27	F	W		1		ME	ME	ME	Keeping House	June	Consumption	27	Robbins/Brown
316	Wade, Edith E	2	F	W	1			ME	ME	ME		Feb		2	Brown
320	Baker, Mary	82	F	W			1	ME	ME	ME	Boarder	Feb		82	Brown
PR	Holt Mary O	33	F	W		1		US	US	US	House Work	Apr			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.

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:

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:

A -  
Line #  
  
5

Place where the Family of the deceased resided June 1 1880		
Town	County	State
Mercer	Somerset	ME

B -  
Line #

Place where 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 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	Strang. Unib., Hernia		L Brown	13				25	Pneumonia		L Brown
2	Apoplexy		L Brown	14				26	Pneumonia		L Brown
3				15				27			
4	Phthisis		L Brown	16				28			
5	Organic dis of Heart		L Brown	17				29	Whooping Cough	Cerebritis	L Brown
6	Pleuritis		L Brown	18				30	Whooping Cough	Cerebritis	L Brown
7				19				31			
8	Diphtheria		L Brown	20				32	Phthisis		L Brown
9				21				33	Tuberculosis	Cerebritis	L Brown
10				22	Cerebritis		L Brown	34	Apoplexy		L Brown
11				23	Phthisis		L Brown	35			
12	Purpura Hemmhage		L Brown	24	Phthisis		L Brown	36			

