Page No. _____
Supervisor's Dist. No. _____
Enumeration Dist. No. _____

1880 CENSUS — UNITED STATES

Microfilm
Roll No. _____

SCHEDULE 1. Inhabitants in _____, in the County of _____, State of _____

enumerated by me on the _____ day of June, 1880

_____ Enumerator

Name of Street House Number	Dwelling Number	Family Number	Names	Color	Sex	Age prior to June 1st	Month of birth if born in census year	Relationship to head of house	Single	Married	Widowed, Divorced, D.	Married in census year	Profession, Occupation or Trade	No. of months unemployed	Health Information Item No.	Attended School	Cannot read Cannot write	Place of birth	Place of birth of father	Place of birth of mother

Health Information ItemNumbers: 15 - Sick or temporarily disabled; 16 -Blind; 17 - Deaf & dumb; 18 - Idiotic; 19 - Insane; 20 - Maimed or crippled

Transcribed by _____ . _____ , 20 ____