



Nonpopulation Census:

**V I R T U A L
G E N E A L O G Y F A I R**



Agriculture, Manufacturing, and Social Statistics

Claire Kluskens

How many acres of wheat? How many cows? And more! Claire Kluskens describes the details you may learn about your ancestors' lives from the 1850, 1860, 1870, and 1880 census schedules of agriculture, industry, mortality, and social statistics, as well as the 1935 census of business.



Claire Kluskens

Archivist
National Archives
Washington, DC

Claire Kluskens is a genealogical projects archivist specializing in immigration, census, military, and other records of high genealogical value. She spearheaded the completion of more than 330 National Archives microfilm publications, and now works on certain projects for the National Archives Catalog. She lectures frequently and has published extensively in national, state, and local genealogical publications. Claire has been a National Archives staff member since 1992 and has done genealogical research since 1976.

Nonpopulation Census Records

Counting Products and Problems

Claire Kluskens
October 2016

Nonpopulation Census Schedules

- Mortality, 1850–1880, 1885
- Agriculture, 1850–1880, 1885
- Manufacturing / Industry, 1810, 1820, 1850–1880, 1885
- Social Statistics, 1850–1870
- Defective, Dependent & Delinquent Classes, 1880
- 1935 Census of Business

Mortality

Deaths during the year ended June 1, 1850

Deaths during the year ended June 1, 1860

Deaths during the year ended June 1, 1870

Deaths during the year ended June 1, 1880

June	1849
July	1849
August	1849
September	1849
October	1849
November	1849
December	1849
January	1850
February	1850
March	1850
April	1850
May	1850

Mortality

May be the “only record” of death or existence of some people.

--No death record or gravestone. 1860 Geauga County (Ohio) mortality schedule lists 52 persons for whom there is no gravestone or other record of burial in that county.

--Only census record. 1860 Geauga County (Ohio) mortality schedule lists 58 children born after the 1850 census whose only "census record" is the 1860 mortality schedule.

--May be the only record of existence for children who have no gravestone.





Alternate record possibilities:

Newspaper mention

Baptismal records

Mortality

Ancestry.com databases

Matches 1-7 of 7		Sort By	Popularity
Title	Collection	Records	
 U.S. Federal Census Mortality Schedules, 1850-1885	Census & Voter Lists	1,579,624	
 U.S. Federal Census Mortality Schedules Index	Census & Voter Lists	492,925	
 U.S. Census Mortality Schedules, New York, 1850-1880	Census & Voter Lists	263,880	
 Missouri Mortality Records, 1850 and 1860	Census & Voter Lists	2,060	
 Bill of mortality	Stories, Memories & Histories	115	
 Montgomery County, New York mortality schedules	Census & Voter Lists	62	

Mortality

Page No. 2

SCHEDULE 3.—Persons who Died during the Year ending 1st June, 1880, in Chester Township in the County of Geauga State of Ohio, enumerated by me, S. C. Field Ass't Marshal.

NAME OF EVERY PERSON WHO DIED during the year ending 1st June, 1880, whose usual place of abode at the time of death was in this family.	DESCRIPTION				PLAGE OF BIRTH, Naming the State, Territory, or Country.	THE MONTH in which the person died.	PROFESSION, OCCUPATION, OR TRADE.	DISEASE OR CAUSE OF DEATH.	NUMBER OF DAYS ILL.
	Age	Sex	White, Colored, or Indian.	Free or Slave.					
1	2	3	4	5	6	7	8	9	10
1 P. Wiebert	7	f			Ohio	Aug		Diphtheria	3 days
2 P. Gustenburg	2	m			Do	Sept		Do	3 "
3 A. Williams	18	f			Conn	June		Cancer	4 wks
4 M. Tiffany	4	f			Ohio	Sept		Diphtheria	1 wks
5 A. "	4	f			Do	Oct		Do	1 day
6 P. Melch	72	f			Canada	Sept		Old Age	1 wks
7 C. O. Lyman	16	m			Ohio	May		Accidental	2 days
8 J. D. Whitman	17	m			Do	Nov		Syphilitic Fever	2 wks
9 H. Smith	17	m			Mass	July		Accidental	11 days
10 B. Salita	3	f			Ohio	Sept		Diphtheria	2 "
11 F. Crane	2	f			Do	Nov		Do	2 "
12 C. Baldwin	69	m			Conn	May	Farmer	Pleurisy	2 wks
13 A. Lyman	3	f			Ohio	Feb		Diphtheria	1 day
14 J. R. "	1	m			Do	29		Do	11 days
15 V. Gilmore	1	f			Do	Jan		Scarlet Fev	4 "
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									
32									
33									
34									
35									

Total number of deaths 15 { No. of white males _____ No. of black males _____ No. of colored males _____ Total male deaths _____
 No. of white females _____ No. of black females _____ No. of colored females _____ Total female deaths _____
 No. of married _____ No. of widowed _____

REMARKS:

Mortality, 1850, 1860, 1870

Page No. 2

SCHEDULE 3.—Persons who Died during the Year ending 1st June, 1860, in Chester Township in the County of Geauga State of Ohio, enumerated by me, J. H. Field Ass't Marshal.

NAME OF EVERY PERSON WHO DIED during the year ending 1st June, 1860, whose usual place of abode at the time of death was in this family.	DESCRIPTION.				Married or widowed.	PLACE OF BIRTH, Naming the State, Territory, or Country.	THE MONTH in which the person died.	PROFESSION, OCCUPATION, OR TRADE.	DISEASE OR CAUSE OF DEATH.	NUMBER OF DAYS ILL.
	Age.	Sex.	White, black, or mulatto.	Free or slave.						
1	2	3	4	5	6	7	8	9	10	11
1 P. Niebert	9	f				Ohio	Aug		Diphtheria	3 days
2 J. Dusenbury	2	m				Do	"		Do	3 "
3 R. Williams	78	f			m	Conn	June		Cancer	4 mos
4 M. Tiffany	11	f				Ohio	Sept		Diphtheria	1 week
5 A. "	4	f				Do	Oct		Do	1 day
6 P. Welch	73	f			m	Canada	Sept		Old Age	1 week
7 C. O. Lyman	16	m				Ohio	May		Accidental	2 days
8 J. D. Whitman	17	m				Do	Nov		Erysiploid Fever	2 weeks
9 W. Smith	17	m				Mass	July		Accidental	11 days
10 B. Patitza	3	f				Ohio	Sept		Diphtheria	2 "
11 F. Crane	2	f				Do	Nov		Do	2 "
12 C. Baldwin	69	m			m	Conn	May	Fanner	Pleurisy	2 weeks
13 A. Lyman	3	f				Ohio	Feb		Diphtheria	1 day
14 J. R. "	1	m				Do	Do		Do	10 days
15 V. Gilmore	8	f				Do	Jan		Scarlet Fever	4 "
16										

Page No. 1

Supervisor's Dist. No. 8

Enumeration Dist. No. 69

[7-222]

1970-1980

1980

Received July 30, 1987

Note A.—The Census Year begins June 1, 1970, and ends May 31, 1980.

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, 1980, enumerated by me in Chester Township in the County of Chester, State of Ohio.

W. B. Thomas, Enumerator.

Name of the person deceased.		Personal Description.	What was the cause of death?	Place of birth of this person, reported by the decedent or by the family.	When was the person born?	When was the person married?	Not to be entered on the report to persons under 10 years of age.	The month the person died.	Disease or cause of death.	How long a resident of the county of residence at date of death.	If last illness attended by a physician, name of physician.	Name of attending Physician.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
1	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
2	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
3	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
4	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
5	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
6	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
7	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
8	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
9	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
10	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
11	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
12	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
13	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
14	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
15	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
16	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
17	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
18	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
19	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
20	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
21	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
22	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
23	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
24	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
25	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
26	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
27	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830		Feb	Influenza	14 yrs		Dr. Lyman
28	Wm. G. Emery	72, A, W, 1	Cholera	Ohio	1808	1830						

Chester Twp., Geauga Co., Ohio. T1159, Roll 104

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 1-4, 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 *Chester Township* **in the County of**

Granga, State of Ohio

by me in Chest
W. J. Thomas

Enumerators

Transferred from P. R. (Public Record)

Mortality, 1880

Page No. 1
 Supervisor's Dist. No. 8
 Enumeration Dist. No. 69

[7-222.]

Received July 30, 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 Chester Township in the County of Orange, State of Ohio, W. J. Thomas Enumerator.

1.	2.	Personal Description.			What was the civil condition of the person who died?			NATIVITY.			12.	13.	14.	15.	16.	17.
		Age at last birthday. If under 1 year, give month in fraction, thus— Under 1 month, give day in fraction, thus— 3 days— $\frac{3}{12}$ 3 months— $\frac{3}{12}$ 3 years— $\frac{3}{12}$ Sex—Male (M) Female (F) Color—White (W), Black (B), Mexican (M), Chinese (C), Indian (I) Single / Married / Widowed	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 9.	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? If less than 1 year, state month in fraction, thus— $\frac{1}{12}$	If the disease was not contracted at place of death, state the place.						
17	Mary E. Lomax	72	F	W	1	Ohio	Ohio	Ohio	Feb	Feb	Inflammation of lungs	2 months	Dr. Lyman			
43	James G. Lomax	86	F	W	1	Mass.	Mass.	Mass.	Feb	Feb	Apoplexy	5 1/2 yrs	Dr. Lyman			
71	Edith Keeney	2	F	W	1	Ohio	N.Y.	Ohio	June	June	Consumption	2 yrs	James Sweeney			
107	Optor Williams	52	F	W	1	Mass	Mass	Mass	Feb	Feb	Cholera	46 yrs	Dr. Lyman			
	George B. Richmond	46	M	W	1	Canada	Canada	Canada	Black and blue	Black and blue	Cholera	7 yrs	Dr. Lyman			
158	Raymond Cress	5	M	W	1	Ohio	Ohio	N.Y.	March	March	of leg rolling over him	5 yrs	Died by accident			
	Infant son of Cress	2	M	W	1	Ohio	Ohio	Ohio	Sept	Sept	Inflammation	1 month	Dr. Lyman			
	Laura B. Cleveland	19	F	W	1	Ohio	Mass	Conn	Nov	Nov	Consumption	19 yrs	James Shepard			

Mortality, 1880

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.

- (1) Death occurred in this district, but family resided elsewhere
- (2) Death occurred outside district, but person resided here
- (3) "Remarks"

Mortality, 1880

Page No. 1

Supervisor's Dist: No. 3

Enumeration Dist: No. 187

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 Eastland, in the County of Livingston, State of Michigan, David C. Campbell, Enumerator.

1.	2.	3. Personal Description.				4. What was the civil condition of the person when he died?			5. NATIVITY.			12. The month in which the person died.	13. Disease or cause of death.	15. If the disease was the immediate cause of death, state the place.	16. Name of attending Physician.
		Age at last birthday. If under 1 year, if the person is broken, the age at death.	Sex—Male (M) or Female (F).	Color—White (W), Black (B), Red (R), or Other (O).	Single (S), Married (M), Widowed (W), or Divorced (D).	Place of birth of this person, naming the State or Territory of the U. S., or the country, if of foreign birth.	When was the Father of this person born? (As an adult.)	Where was the Mother of this person born? (As an adult.)	Profession, Occupation, or Trade.						
										10.	11.				
6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.				
✓ 4	Isolin Chen J	32	M	W	/	Michigan	Island	Mich		Aug	Dysentery	32	Dr. H. H. Hurd		
✓ 12	Wm. G. G. G.	19	M	W	/	Michigan	Island	Island		April	Consumption	19	Dr. H. H. Hurd		
✓ 30	Theresa Hannah	34	F	W	/	Michigan	Island	Island		Jan	Consumption	34	Dr. H. H. Hurd		
✓ 32	Herring Lee	68	M	W	/	Island	Island	Island		Sept	"	8	Dr. H. H. Hurd		
✓ 174	Robert J. J.	55	M	W	/	New York	N. Y.	N. Y.	Farmer	July	Cancer	55	Dr. H. H. Hurd		
✓ 182	William J. J.	32	M	W	/	Michigan	Island	Island		Aug	Consumption	32	Dr. H. H. Hurd		
✓ 211	Walter J. J.	38	M	W	/	Michigan	N. Y.	N. Y.	Farmer	Aug	Consumption	38	Dr. H. H. Hurd		
✓ 220	Wm. H. J.	67	M	W	/	Scotland	Island	Island	Farmer	Dec	Cancer Stomach		Dr. H. H. Hurd		
✓ 254	William J. J.	42	M	W	/	New York	Island	N. Y.		Sept	Consumption		Dr. H. H. Hurd		
✓	Wm. J. J.	63	M	W	/	New York				Nov	Phthisis Pulmonum		Dr. H. H. Hurd		

REMARKS.

In the case reported on line 8 the cause of death was probably cancer of the stomach but was not definitely determined even after a post mortem. In the case reported on line 9 cause of death was not known there being no physician in attendance.

"In the case reported on line 8, the cause of death was probably cancer of the stomach but was not definitely [sic] determined even after a post mortem. In the case reported on line 9, cause of death was not known as there was no physician in attendance."



Agriculture

- 1850–1870 similar (but not identical) forms
- 1880 new form
- 1885 ONLY: Colorado, Florida, Nebraska,
Dakota Territory, New Mexico
- 1917 Virgin Islands only
- 1920 Territories only
- 1930 Territories only

Agriculture and Industry/Manufacturing on Ancestry

Matches 1-2 of 2

Sort By Popularity ▼

Title	Collection	Records
 Selected U.S. Federal Census Non-Population Schedules, 1850-1880	Census & Voter Lists	5,319,494
 U.S. Census Non-Population Schedules, New York, 1850-1880	Census & Voter Lists	957,876

Agriculture (1850)

SCHEDULE 4.—Productions of Agriculture in Wilmington District No. 341 in the
enumerated by me, on the 9th day of September 1850.

Name of Owner, Agent, or Manager of the Farm.	Acres of Land.		Live Stock, June 1st, 1850.																	Products during the	
	Improved.	Unimproved.	Cash value of Farm.	Value of breeding, single and milch.	Horses.	Asses and Mules.	Black Cows.	Working Oxen.	Other Cattle.	Sheep.	Swine.	Value of Live Stock.	Wheat, bushels of.	Rye, bushels of.	Indian Corn, bushels of.	Oats, bushels of.	Barley, bushels of.	Value of Produce of Horses and Cattle.			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19			
James H. Smith	14		600	100	2	2						150			300	200					
Paul & Stephen	20		750	150	3	1		1	20	2	800	25	50	300	200						
Thomas H. Smith	40		3500	200	2	1					175				300						
William H. Smith	75	25	3000	75	1			2			75	61	26	600	250						
John H. Smith	40	10	1500	150	2		3		8	2	200	25	25	100	150						
John H. Smith	85	15	3000	200	1		6	7	14	4	350	50		200	200						
William H. Smith	75	25	3000	100	2		4	4	62	5	310	58		300	200						
Thomas H. Smith	40	25	1500	100	1	3	2		16	20	150	20		100	100						
James H. Smith	50	11	700	150	3	2					240	60		350	250						
William H. Smith	70	55	2500	150	2		7	8	53	4	200	85		200	200						
John H. Smith	30		600	50	1		2	2	18	2	150	16		100	50						
John H. Smith	55	50	3000	150	3	4	4	53	5	200	20		340	250							
Thomas H. Smith	40	20	1500	100	2	2		2		1	200	25		100	100						
John H. Smith	50	32	1500	100	1	2	2	3	27	2	100			300	200						
Thomas H. Smith	45	15	1000	75	3	2	4	24	4	300	15		200	200							
John H. Smith	60	20	2000	100	5	4	8	25	4	200	10		150	200							
John H. Smith	65	35	2000	90	4	6		9	4	250	20		100	100							
Thomas H. Smith	35	12	1000	75	1	4	6	12	6	150			150	200							
John H. Smith	80	20	2000	100	3	4	10	20	4	350	60		300	200							
John H. Smith	100	100	4500	200	9	3	2	3	50	4	100	50		550	100						
James H. Smith	40	15	1000	75	1	2	3	13	1	150			25	100	35						
John H. Smith	62	40	2000	100	6	3	2	15		4	218	19		200	200						
John H. Smith	44	120	3000	100	1	3					2	150	60		250	200					
Jonathan H. Smith	70	25	3000	100	2	2	1				150	40		300	200						
David H. Smith	60	12	1500	100	4	4	2	25	2	100	20		100	30							
William H. Smith	70	25	1000	150	2	3	14	12		1	250			200	200						
John H. Smith	40	40	3000	150	2	6	2	10	60	4	350	30		200	150						
John H. Smith	30	20	800	40		3	2	6		3	50			100	40						
Thomas H. Smith	40	20	1000	100	3	3			40	2	190	15		100	100						
William H. Smith	10	100	75	1	2	2	3	50	2	200	10		300	200							
John H. Smith	40	10	1000	50	1	2	2	30	1	175	75		150	200							
William H. Smith	40	25	1200	150	2	1	4	20	6	140	20		200	200							
John H. Smith	100	150	2500	150	2	4	7	110		450	30		150	100							
John H. Smith	100	90	3000	150	3	4	2	16	20	7	350	10		200	150						
John H. Smith	100	60	3000	150	5	4	2	5	20	4	520	50		200	100						
William H. Smith	150	50	1000	200	2	3	3	30	5	350	40		150	100							
John H. Smith	100	60	2500	150	5	13	5	45	1	250			100	50							
John H. Smith	60	20	1500	75	3	2	2	26	1	200			200	40							
John H. Smith	150	45	2500	100	3	6	8	40	2	350			250	60							
John H. Smith	70	20	1400	100	5	7	2	15	26	4	400			250	150						
John H. Smith	150	50	1500	100	5	10	9	60	5	500	100			250	150						
John H. Smith	269	122	12050	4730	117	16	22	199	1432	136	10993	1109	153	8940	4599						

Agriculture (1850, 1860, 1870)

Forms are similar – but not identical

SCHEDULE 4.—Productions of Agriculture in Willoughby District No. 341 **in the**
enumerated by me, on the 9th **day of** September **1850.**

Name of Owner, Agent, or Manager of the Farm.	Acres of Land.		Cash value of Farm.	Value of farming Imple- ments and Machinery.	Live Stock, June 1st, 1850.								Produce during the					
	Improved.	Unimproved.			Horses.	Asses and Mules.	Milch Cows.	Working Oxen.	Other Cattle.	Sheep.	Swine.	Value of Live Stock.	Wheat, bushels of.	Rye, bushels of.	Indian Corn, bushels of.	Oats, bushels of.	Rice, lbs. of.	Tobacco, lbs. of.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
James Hunt	144		600	100	2		2					150			300	20		

County of Lape **State of** Ohio **during the Year ending June 1, 1850, as**

0681

J. H. Howe Ass't Marshal.

Year ending June 1, 1850.

Ginned Cotton, bales of 400 lbs. each.	Wool, lbs. of.	Peas & Beans, bush. of.	Irish Potatoes, bush. of.	Sweet Potatoes, bush. of.	Barley, bushels of.	Buckwheat, bushels of.	Value of Orchard Pro- ducts in dollars.	Wine, gallons of.	Value of Produce of Market Gardens.	Butter, lbs. of.	Cheese, lbs. of.	Hay, tons of.	Clover Seed, bush. of.	Other Grass Seeds, bushels of.	Hops, lbs. of.	Hemp.		Flax, lbs. of.	Flaxseed, bushels of.	Silk Cocoons, lbs. of.	Maple Sugar, lbs. of.	Cane Sugar, hhds. of 1,000 lbs.	Molasses, gallons of.	Beeswax and Honey, lbs. of.	Value of Home-made Manufactures.	Value of Animals slaughtered.
20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46
		<u>2</u>	<u>400</u>	<u>100</u>			<u>15</u>		<u>15</u>	<u>200</u>		<u>2</u>													<u>15</u>	<u>15</u>
<u>57</u>	<u>1</u>	<u>220</u>					<u>10</u>			<u>200</u>		<u>4</u>												<u>40</u>	<u>22</u>	

[illegible]

Agriculture

Land Acreage

1850 & 1860

Improved Land

Unimproved Land

1870

Improved Land

Unimproved Woodland

Other Unimproved

Agriculture

Cash Value

1850 – 1860 – 1870

Farm

Farming Implements and Machinery

Livestock

Orchard Products

Produce of Market Gardens

Home-made Manufactures

Animals Slaughtered

1870 (additions)

Forest Products

“All farm production, including betterments and additions to stock”

Agriculture

Number of Livestock

1850 – 1860 – 1870

Horses

Asses and Mules

Milch Cows

Working Oxen

Other Cattle

Sheep

Swine

Agriculture

Bushels 1850 – 1850 – 1870 *Year ending June 1*

Wheat [1870: “spring” and “winter”]

Rye

Indian Corn

Oats

Peas and Beans

Irish Potatoes

Sweet Potatoes

Barley

Buckwheat

Clover Seed

(Other) Grass Seed

Flaxseed

Agriculture

Pounds 1850 – 1860 – 1870

Rice

Tobacco

Wool

Butter

Cheese

Hops

Flax

Silk Cocoons

Maple Sugar

Beeswax and Honey [1860: separate columns; 1870: “wax”]

Agriculture

Bales

1850 and 1860

Number of 400-pound bales of ginned cotton

1870

Number of 450-pound bales of ginned cotton

Agriculture

Gallons

1850 – 1860

Wine

Molasses [1860 addition: from what is molasses made]

1870

Wine

Molasses

Milk *sold*

Agriculture

Tons

1850

Hay

Dew Rotted Hemp

Water Rotted Hemp

1860

Hay

Dew Rotted Hemp

Water Rotted Hemp

Other Prepared Hemp

1870

Hay

Hemp

Agriculture

Hogsheads

1850 – 1860 – 1870

Number of 1,000-pound hogsheads of cane sugar

One Man / Family Over Time

Jeremiah (Jerry) Presley														
	Improved	Perm.	Unimp.	Unimp.	Cash	Farm. Imps		Milch	Other			Poultry/	Value	Wheat
	Acres	Meadows	Woodland	Other	Value	& Machs.	Horses	Cows	Cattle	Sheep	Swine	Eggs	Livestock	(bu.)
1850	60			12	\$1,800	\$175	2	3	14	12		no data	\$250	
1860	96				\$2,400	\$40	2	16	2			no data	\$550	60
1870	55		31		\$4,000	\$100	3	5	1		2	no data	\$500	41
1880	40	10	10	20	\$2,800	\$75	3	3	5		2	40/320 doz	\$300	
*1870 winter wheat														
*3 calves dropped in 1879-80														
Indian	Oats	Wool	Irish	Barley	Buckwheat	Butter	Cheese	Hay	Maple	Home	Animals	Forest	Value of all	
Corn (bu.)	(bu.)	(lbs.)	Potatoes	(bu.)	(bu.)	(lbs.)	(lbs.)	(tons)	Sugar lbs.	Manuf.	Slaughter	Prod.	Farm Productions	
200	1800	100	30	40	18	200		15	500	\$10	\$50	no data		
400	300		30			600	1800	18			\$45	no data		
100	228	30	100			500		12		\$125	\$55	no data	\$550	
						350		15 /12 ac.				5 cords/\$10	\$400	

1850, age 49

1860, age 59

1870, age 69

1880, age 79

Manufacturing, 1820

Industry, 1850, 1860, 1870

Manufacturing 1880, 1885

Manufactures, 1820

439

No. 7

Questions to be addressed to the persons concerned in Manufacturing Establishments by the Marshals and their Assistants in taking the Account of Manufactures.

Name of the City, Town, County, or Township, where the Manufacture exists. } *Ortavia Seneca County*

RAW MATERIALS EMPLOYED. { 1. The kind?
2. The quantity annually consumed?
3. The cost of the annual consumption?

NUMBER OF PERSONS EMPLOYED. { 4. Men employed?
5. Women?
6. Boys and Girls?

MACHINERY. { 7. Whole quantity and kind of Machinery?
8. Quantity of Machinery in operation?

EXPENDITURES. { 9. Amount of capital invested?
10. Amount paid annually for wages?
11. Amount of Contingent Expenses?

PRODUCTION. { 12. The nature and names of Articles Manufactured?
13. Market value of the Articles which are annually manufactured?

14. General Remarks concerning the establishment, as to its actual and past condition, the demand for, and sale of, its Manufactures.

Here answer the above Questions, commencing at

No. 1. *Rye & Corn consumed annually 2000 Bushels*
Cost Rye 50 Corn 40 ct per Bushel
Machinery 1 Patent Boiler & apparatus
Capital invested 600 dollars
2 men Employed
Wages - 18 dollars per month
Production Whiskey 6000 Gallons annually
Value about 33 ct per Gallon
Sales dull

Collected & recorded by John Young E.C.

Industry, 1850

SCHEDULE 5.—Products of Industry in Chertownship **in the County of** Georgia **State**
of Ohio **during the Year ending June 1, 1850, as enumerated by me,** W. W. Bruce **Ass't Marshal.**

Name of Corporation, Company, or Individual, producing Articles to the Annual Value of \$500.	Name of Business, Manufacture, or Product.	Capital invested in Real and Personal Estate in the Business.	Raw Material used, including Fuel.			Kind of motive power, machinery, structure, or resource.	Average number of hands employed.		Wages.		Annual Product.		
			Quantities.	Kinds.	Values.		Male.	Female.	Average monthly cost of male labour.	Average monthly cost of female labour.	Quantities.	Kinds.	Values.
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	<u>Mason & Ames</u>	<u>Blacksmiths</u>	<u>2000</u>	<u>2000</u>	<u>Iron</u>	<u>160</u>	<u>Hand</u>	<u>3</u>	<u>60</u>		<u>13</u>	<u>Waggons</u>	<u>400</u>
				<u>250</u>	<u>steel</u>	<u>20</u>					<u>3</u>	<u>Buggies</u>	<u>100</u>
				<u>7000</u>	<u>coal</u>	<u>70</u>						<u>Minerals</u>	<u>500</u>
						<u>200</u>							<u>1000</u>

Industry, 1860

Page No. 1

SCHEDULE 5.—Products of Industry in Hartford Township in the County of Franklin State
of Ohio during the Year ending June 1, 1860, as enumerated by me, M. Farnish Ass't Marshal.
Post Office Hartford

1	2	3	RAW MATERIAL USED, INCLUDING FUEL.			7	AVERAGE NUMBER OF SLAVE EMPLOYED.		WAGES.		AVERAGE PRODUCT.		
			Quantity.	Kind.	Value.		Male.	Female.	Average number of male.	Average number of female.	Quantity.	Kind.	Value.
1	John Deaf	Stone Mill	1000	30000 lb	15	1 mill	2		50		10000 lb	Stone	100
2	H. Bell	Steam Saw Mill	1300	200000 lb	700	1 saw	2		40		20000 lb	Saw lumber	200
3	Egler Gregory	Carriage Shop	1000	2000 lb	100				100		25	Carriage	200
4	Benj. Leach	Sawery	400	10000 lb	80	1 fire	3		10		10000 lb	St. Oak	100
5	John Egater	Harness Shop	200	100 lb	20		1		20		30 sets	Harness	100
6	5	3,100			2,405		13						9,500
7													
8	H. Applegate	Distillery	1000	50000 lb	400	10000 lb	2		10		70000 lb	Whisky	1700
9	Paul Hall	Carriage Shop	200	2000 lb	100		2		40		6	Carriage	600
10	Paul Arthurholt	Saw Mill	1000	20000 lb	200	10000 lb	30		30		70000 lb	St. Oak	3700
11	Elie Arthurholt	Saw Mill	100	40000 lb	200	10000 lb	1		20		40000 lb	St. Oak	100
12	Henry Strabel	Carriage Shop	300	10000 lb	300		2		40		6	Carriage	600
13	David Burnett	Shoeing Machine	2000	10000 lb	200		2		90		2	Shoeing Machine	500
14													
15	6	11,100			7,111		13						8,910
16	Isaac Burnett	Saw Mill	100	100000 lb	100	10000 lb	1		20		100000 lb	St. Oak	1000
17	Isaac Smith	Saw Mill	1000	100000 lb	1000	10000 lb	2		40		100000 lb	St. Oak	1000
18	John Saling	Carriage Shop	400	10000 lb	200		2		40		10000 lb	St. Oak	100
19	Seller Oliver	Shoeing Machine	1000	10000 lb	100		1		20		10000 lb	St. Oak	100
20	Oliver & Wilson	Saw Mill	1000	100000 lb	1000	10000 lb	2		20		100000 lb	St. Oak	1000
	5	3,050			2,075		8						4,492

Industry, 1860

Page No. 1

SCHEDULE 5.—Products of Industry in Hubbard Township **in the County of** Township **State**
of Ohio **during the Year ending June 1, 1860, as enumerated by me,** W. Parrish **Ass't Marshal.**
Post Office Hubbard

Name of Corporation, Company, or Individual, producing articles to the annual value of \$500.	Name of Business, Manufacture, or Product.	Capital Invested, in real and personal estate, in the Business.	RAW MATERIAL USED, INCLUDING FUEL.			Kind of Motive Power, Machinery, Structure, or Resource.	AVERAGE NUMBER OF HANDS EMPLOYED.		WAGES.		ANNUAL PRODUCT.		
			Quantities.	Kinds.	Values.		Male.	Female.	Average monthly cost of male labor.	Average monthly cost of female labor.	Quantities.	Kinds.	Values.
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1 John Shoaf	Stone Ware Manufactory	\$200	30 tons	Lelay limestone	15	1 mill	2		50		10,000 Galls	Stone Ware	\$00.
2 Wm Bell	Steam Saw Mill	1300	200,000 ft	Saw Logs	7000	1 saw	2		40		200,000 ft	Sawed Lumber	2000
3 Eyster Gregory	Carrriage Shop	1000	2000 ft	Lumber	100		5		162		25	Carrriages	3,100
4 Benj Leach	Lashery	400	1000 Bush	Ashes	870	1 fire	3		60		100 tons	Pot Ash	1500
5 John Eyster	Harness Shop	200	800 lbs	Leather	240		1		20		30 Sets	Harnesses	1,100
				Trimmings	150								
6	5	2,100			2,405		13						9,500

Industry, 1870

Page No. 1

SCHEDULE 4.—Products of Industry in Chester Township, in the County of Grange, State of Ohio, during the year ending June 1, 1870, as enumerated by me.

Post Office: Chester & Roads David Gates, Ass't Marshal.

1	2	3	MOTIVE POWER.		MACHINES.		AVERAGE NUMBER OF HANDS EMPLOYED.			11	12	MATERIALS. (Including Mill Supplies and Fuel.)			PRODUCTION. (Including all Jobbing and Repairing.)		
			Kind of Power (steam, water, wind, horse, or hand).	If steam or water, No. of horse- power.	Name or Description.	Number of.	Males above 16 years.	Females above 15 years.	Children and youth.			Kinds.	Quantities.	Values (omitting fractions of a dollar).	Kinds.	Quantities.	Values (omitting fractions of a dollar).
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1	Smith & Buch	Brick	500	Hand			4			400	2	Clay			Brick	110,000	900
												Sand		100			
												Wood					
2	Colman Charles	Blacksmithing	125	Hand			1			120	12	Iron	2 Ton	240	Croston Work		900
												Coal	6 "	50			
														290			
3	Barthlett Lucius	Churn	5000	Hand			1	3	6	1400	8	Milk	270,000 Gall	27000	Churn	270,000 lbs	35000
												Salt & Packing			Butter	5000 "	1,250
												Remnants		1100			
												Smalls					
												Fuel		28100			56350
4	Barthlett Lucius	Churn	4000	Hand			1	2	1	700	7	Milk	67500 Gall	6750	Churn	70,000 lbs	10000
												Salt & Packing					
												Smalls		275			
												Remnants & Fuel		7025			

Manufacturing, 1880

Sheet 3
Page No. 3
Supervisor's Dist. No. 3
Enumeration Dist. No. 3

The following classes of Manufacturing Establishments will be reported on a SPECIAL MANUFACTURING SCHEDULE, and not on this Schedule, viz:
(1.) Boot and Shoe Factories. (5.) Lumber Mills and Saw Mills. (8.) Coal Mines.
(2.) Cheese and Butter Factories. (6.) Brick Yards and Tile Works. (9.) Agricultural Implement Works.
(3.) Flouring and Grist Mills. (7.) Paper Mills. (10.) Quarries.
(4.) Salt Works.

SCHEDULE 3.—MANUFACTURES.—Products of Industry in Cleveland, in the County of Cuyahoga, State of Ohio, during the twelve months beginning June 1, 1879, and ending May 31, 1880, as enumerated by me.

Post Office: Cleveland O. 145 Clinton

H. C. App
Special Agent
Enumerator

Name of Corporation, Company, or Individual, producing in the Value of \$500 annually	Name of Business, Manufactory, or Product	Capital (paid up and invested) at first cost (not including interest on debt)	Employed (number of hands employed) at first cost (not including interest on debt)	Wages and Hours of Labor	Months in Operation	Value of Product (not including interest on debt)	Value of Material Consumed (not including interest on debt)	Value of Fuel Consumed (not including interest on debt)	Value of Power Consumed (not including interest on debt)	Power used in Manufacture										If steam power is used
										If water power is used										
On what River or Stream?											If steam power is used									
Kind											If steam power is used									
Horse power											If steam power is used									
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Manufacturing, 1880

Supervisor's Dist. No. 8
Enumeration Dist. No. 69

Special Schedules of Manufactures—Nos. 5 and 6.

Received July 30, 80

LUMBER MILLS AND SAW-MILLS—BRICK YARDS AND TILE WORKS.

Products of Industry in Township of Chester, in the County of Geauga, State of Ohio
during the twelve months beginning June 1, 1879, and ending May 31, 1880, as enumerated by me.

W. P. Leland *Enumerator*

NAME OF CORPORATION, COMPANY, OR PARTNERSHIP, SHOWING THE VALUE OF THE BUSINESS		CAPITAL, REAL AND PERSONAL, INVESTED IN THE BUSINESS		ATTACHED NUMBER OF SLAVE EMPLOYED		WAGES AND BODIES OF LABOR										MONTHS IN OPERATION		MATERIALS		PRODUCTS AND MILL PRODUCTS		
						Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
<u>Frederick B. Ottwell</u>	<u>2500</u>	<u>5</u>	<u>3</u>			<u>10</u>	<u>10</u>	<u>150</u>	<u>1000</u>	<u>12</u>						<u>1</u>	<u>1</u>	<u>25000</u>	<u>1500</u>	<u>1000</u>	<u>450</u>	<u>4</u>

*OK
Geauga*

LUMBER MILLS AND SAW-MILLS—Continued.

PROPER SAW-MILL PRODUCTS—Continued.					BRICKS AND TILES					POWER USED IN MANUFACTURE										IF OTHER POWER IS USED		
Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower
27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49

BRICK YARDS AND TILE WORKS.

NAME OF CORPORATION, COMPANY, OR PARTNERSHIP, SHOWING THE VALUE OF THE BUSINESS		CAPITAL, REAL AND PERSONAL, INVESTED IN THE BUSINESS		ATTACHED NUMBER OF SLAVE EMPLOYED		WAGES AND BODIES OF LABOR										MONTHS IN OPERATION		MATERIALS		PRODUCTS AND MILL PRODUCTS		
						Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed	Number of persons employed							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23

BRICK YARDS AND TILE WORKS—Continued.

PRODUCTS					POWER USED IN MANUFACTURE										IF OTHER POWER IS USED		
Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of thousand feet	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower	Number of horsepower
27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44

Notes.—As the 12 months of the year should be accounted for this; 12 months on full time; or 8 months on full time and 4 months on half time; or 10 months on full time and 2 months on half time.
The inquiry is made for the value of material and product of prime importance. Cost of material and product should be included in making the return relative thereto.
The cost of freight, express, and other general expenses of a manufacturing establishment are not to be included in the return. Mill, engine, and fuel should be included.
The value of the product, in the case of mills and factories producing for additional market, means the wholesale price of the goods. In the case of small shops producing goods or doing work for the neighborhood only, the value of the product means the price charged for the goods.
Only serviceable buildings and engines are to be reported.
Horse-power.—This is an inquiry of great importance. The best information available should be used in filling these returns.

CHARACTERS 1 to 15 have reference to all factories of this class, and should be filled for every establishment enumerated.
CHARACTERS 16 to 21 have reference to manufacturers of cheese only.
CHARACTERS 22 to 25 have reference to manufacturers of butter only.
CHARACTERS 26 to 28 have reference to those factories that manufacture both cheese and butter.
CHARACTERS 29 and 30 have reference to manufacturers of condensed milk.

Social Statistics 1860 example - Clarion, Bureau Co., Illinois

SCHEDULE C.—Social Statistics of Township of Clarion in the County of Bureau State of Illinois for the Year ending June 1, 1860, as enumerated by me, James H. Kellogg, Ass't Marshal.

Name of Division	VALUATION OF ESTATE, REAL AND PERSONAL.			ANNUAL TAXES.				COLLEGES, ACADEMIES, AND SCHOOLS.						
	1	2	3	Name or kind of each.	Amount of each.	How paid.	No.	Character, rank, or kind.	No. of Teachers.	No. of Pupils.	Amount annually realized from endowment.	Raised by taxation.	Received from public funds, other sources.	
Clarion	Real Estate . . .	\$135082	State	12846	Cash	12	Common School	24	300	Nothing	877	459	1750	
	Personal Estate . .	\$51881	County	726	do									
	Total	\$186963	Town	4080	do									
	How Valued . . .	Assess Books	School	10846	do									
	True Valuation . .	\$272915	Land	2874	do									
Clarion	SEASONS AND CROPS.													
	What Crops are sown.		To what extent.	Usual average Crop.										
	14	15	16											
	Wheat	44	18 bushels											
	Oats	10	80 "											
Clarion	LIBRARIES.													
	No.	Kind.	No. of Volumes.	Name.	Character.	How often published.	Circulation.	No. of Churches.	Denomination.	No. each with accommodation.	Value of Church Property.			
	17	18	19	20	21	22	23	24	25	26	27	28		
	1. Hingham 300 1000													
	1. Hingham 300 1000													
Clarion	NEWSPAPERS AND PERIODICALS.													
	No.	Kind.	No. of Volumes.	Name.	Character.	How often published.	Circulation.	No. of Churches.	Denomination.	No. each with accommodation.	Value of Church Property.			
	17	18	19	20	21	22	23	24	25	26	27	28		
	1. Hingham 300 1000													
	1. Hingham 300 1000													
Clarion	RELIGION.													
	No.	Kind.	No. of Volumes.	Name.	Character.	How often published.	Circulation.	No. of Churches.	Denomination.	No. each with accommodation.	Value of Church Property.			
	17	18	19	20	21	22	23	24	25	26	27	28		
	1. Hingham 300 1000													
	1. Hingham 300 1000													
Clarion	PAUPERISM.													
	Name of Division.	Whole No. of Paupers supported within the year.	Whole No. on 1st June.	Annual Cost of Support.	Whole No. of Criminals confined within the year.	In prison on 1st June.	Average monthly wages of a family with board.	Average to a day laborer without board.	Average to a day laborer with board.	Average to a day laborer without board.	Average to a day laborer with board.	Weekly wages of a family with board.	Price of board in laboring men per week.	
	29	30	31	32	33	34	35	36	37	38	39	40	41	
	14 142 622 150 200 200													
	14 142 622 150 200 200													

SCHEDULE C. Social Statistics of Township of Sevier in the County of Bureau State
of Illinois for the Year ending June 1, 1890, as enumerated by me, Samuel H. Hake Ass't Marshal.

Name of Division	VALUATION OF ESTATE, REAL AND PERSONAL.				ANNUAL TAXES.			COLLEGES, ACADEMIES, AND SCHOOLS.					
	Name or kind of real.		Amount of each.	How paid.	No.	Character, rank, or kind.	No. of Pupils.	Amount generally received from tuition.	Received by taxation.	Received from public funds.	Received from other sources.		
1	2	3	4	5	6	7	8	9	10	11	12		
Real Estate . . .	\$158654	State	1415	cash	1	Academy	2	110	Support by State	100			
Personal Estate . .	\$5838	County	717	do	2	Common School	16	532	Wages	1306	593		
Total	\$217032	County	142	do									
How Valued? . . .	Assess. Book	School	853	do									
True Valuation . .	\$422664	Academy	1601	do									
SEASONS AND CROPS.													
What Crops are sown.		To what extent.	Usual average crop.										
14	15	16											
Wheat		40	Wheat 100 bushels										
Corn		40	Corn 100 bushels										
Oats		40	Oats 100 bushels										
Rye		40	Rye 100 bushels										
Barley		40	Barley 100 bushels										
Clover		40	Clover 100 bushels										
Timothy		40	Timothy 100 bushels										
Alfalfa		40	Alfalfa 100 bushels										
Hops		40	Hops 100 bushels										
Flax		40	Flax 100 bushels										
Linen		40	Linen 100 bushels										
Cotton		40	Cotton 100 bushels										
Wool		40	Wool 100 bushels										
Silk		40	Silk 100 bushels										
Sugar		40	Sugar 100 bushels										
Tobacco		40	Tobacco 100 bushels										
Rice		40	Rice 100 bushels										
Wheat		40	Wheat 100 bushels										
Corn		40	Corn 100 bushels										
Oats		40	Oats 100 bushels										
Rye		40	Rye 100 bushels										

Name of Division	LIBRARIES.				NEWSPAPERS AND PERIODICALS.				RELIGION.			
	No.	Kind.	No. of Volumes.	Name.	Character.	How often published.	Circulation.	No. of Churches.	Denomination.	No. each will accommodate.	Value of Church Property.	
17	18	19	20	21	22	23	24	25	26	27	28	
									1 George	500	2000	
									1 Methodist	500	10000	
									1 Baptist	500	6000	

(1) Insane

Troy Twp., Geauga Co., Ohio, T1159, Roll 99

Defective, Dependent & Delinquent Classes (1880)

(1) Insane

24169

[7-306.]

A.

Supplemental Schedules, Nos. 1 to 7, for the Defective, Dependent, and Delinquent Classes.

INSANE inhabitants in Troy in the County of Geauga State of Ohio
 enumerated by me H. H. Chapman, Enumerator.

Supervisor's Dist. No. 80 }
 Enumeration Dist. No. 80 }

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of the insane, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, after making the proper entries upon the Population Schedule (No. 1), transfer the name (with Schedule page and number) of every insane person found, from Schedule No. 1 to this Special Schedule, and proceed to ask the additional questions indicated in the headings of the several columns.

Enumerators may obtain valuable hints as to the number of the insane, and their residence, from physicians who practice medicine in their respective districts.

Number taken from Schedule No. 1.		NAME.	Residence when at home.—(See note A.)		Form of Disease. (See note B.)	History of attack.—(See note C.)			Restraint and Seclusion.—(See note D.)		Hospital or Asylum.—(See note E.)		See Note F.				
Number of page.	Number of line.		City or Town.	County (if in same State), or State (if in some other State).		Duration of present attack, not including previous attacks.	Total number of attacks, including the present one.	Age at which first attack occurred.	Does this person require to be usually or often kept in a cell or other apartment under lock and key, either by day or at night?	Does this person require to be usually or often restrained by any mechanical appliance, such as a strap, straight jacket, &c., and if yes, state the character of the appliance used.	Has this person ever been an inmate of any hospital or asylum for the insane? If yes, name the said hospital or asylum.	What has been the result of treatment? Has this person been cured? If yes, state the character of the cure.		Length of absence from asylum.			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
6	11	Turner, Eunice	Troy	Geauga	Demented												

Page 6, Line 11

Turner, Eunice. Troy, Geauga Co., Demented

Defective, Dependent & Delinquent Classes (1880)

(2) Idiots

NOTE F.—In making entries in columns 16, 17, and 18, an affirmative mark only will be used, thus: /.

IDIOTS.

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of the idiots, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, after making the proper entries upon the Population Schedule (No. 1), transfer the name (with Schedule page and number) of every idiot found, from Schedule No. 1 to this Special Schedule, and proceed to ask the additional questions indicated in the headings of the several columns.

The word "idiot" has a special meaning which it is essential for every enumerator to know. An idiot is a person the development of whose mental faculties was arrested in infancy or childhood before coming to maturity. It is sometimes difficult to distinguish between the stupidity which results from idiocy and that which is due to the loss or deterioration of mental power in consequence of insanity. The latter is not true idiocy, but dementia or imbecility. The enumeration desired for the Census is of *true idiots only*. Demented persons should be classed with the insane.

Enumerators may obtain valuable hints as to the number of idiots, and their residences, from physicians who practice medicine in their respective districts.

Number taken from Schedule No. 1.		NAME.	Residence when at home. (See Note A.)		Is this person self-supporting, or partly so? (See Note B.)	Age at which idiocy occurred. (See Note C.)	Supposed cause of idiocy (if acquired). (See Note D.)	Size of head. (Large, small, or natural.)	Training School.		(See Note E.)						
Number of page.	Number of line.		City or Town.	County (if in same State), or State (if in some other State).					Has this person ever been an inmate of a training school for idiots? If yes, name the said training school.	What has been the total length of time spent by him (or her) during his (or her) attendance in training school or training schools.	Date of discharge. (Year only.)	Is this person also insane? /	Is he (or she) also blind? /	Is he (or she) also deaf? /	Is he (or she) also an epileptic? /	Is he (or she) pauperized, and if yes, on what date? /	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1	2	Barrows Lydia S.	Troy	Geauga Ohio	No		B. Mal-practice at birth	Small									
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	

NOTE A.—An idiot may be found either at his own home or away from it in some institution, such as a training school, asylum, or poor-house. In the latter case, his residence when at home must be stated, in order that he may be accredited to the State or county to which he properly belongs, and that the county in which the institution is situated may not be charged with more than its due proportion of idiots.

NOTE B.—If self-supporting, say "yes;" if partly self-supporting, say "partly;" if not, say "no." Indicate all inmates of institutions who are maintained or treated at their personal expense (not at the expense of any town, county, or State, nor of the institution) by the word "Pay."

NOTE C.—If an idiot from birth, say "B;" if idiocy occurred after birth, state the age at which it occurred. *Special pains should be taken to indicate all idiots from birth.*

NOTE D.—The causes of idiocy are such as the following: scarlet fever, measles, meningitis, &c., blow on head, fall, &c., fright, &c.

NOTE E.—In making entries in columns 13, 14, 15, 16, 17, and 18, an affirmative mark only will be used, thus: /.

Defective, Dependent & Delinquent Classes (1880)

(3) Deaf-Mutes

B.

DEAF-MUTES.

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of deaf-mutes, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, *after making the proper entries upon the Population Schedule (No. 1)*, transfer the name (with Schedule page and number) of every deaf-mute found, from Schedule No. 1 to this Special Schedule, and proceed to ask the *additional questions* indicated in the headings of the several columns. Care must be taken not to enumerate persons who are deaf only (hard of hearing) or dumb only (tongue-tied) as deaf-mutes. A deaf-mute is one who cannot speak, because he cannot hear sufficiently well to learn to speak.

Enumerators may obtain valuable hints as to the number of deaf-mutes, and their residence, from physicians who practice medicine in their respective districts, also from school-teachers.

Great assistance may be derived from questions addressed to deaf-mutes themselves: Do you know any deaf-mutes in this neighborhood? The class feeling of the deaf and dumb, arising from their isolated state, is so great that they seek each other out for the sake of companionship, and ordinarily know every deaf-mute for miles around.

Number of page.	Number taken from Schedule No. 1.	NAME.	Residence when at home. (See Note A.)		Is he (or she) self-supporting, or partly so. (See Note B.)	Age at which deafness occurred. (See Note C.)	Supposed cause of deafness, if known.	See Note D.		Institution life.			See Note E.		
			City or Town.	County (if in same State), or State (if in some other State).				Is this person semi-deaf?	Is he (or she) semi-deaf?	Has this person ever been an inmate of an institution for deaf-mutes? If yes, give the name of such institution.	What has been the total length of time spent by him or her in any such institution?	Date of his (or her) discharge. (Year only.)	Is this person also insane?	Is he (or she) also blind?	Is he (or she) also blind?
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
9	17	Owen Lucy ✓	Parkman	Geauga	Yes	1	Got some object in nose	Yes	Yes	Columbus O. Infirmary, 6 mos 1845					
24	33	Owen Rauler ✓	Parkman	Geauga	Yes	5									
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															

NOTE A.—A deaf-mute may be found either at his own home or away from it in some educational institution, asylum, or poor-house. In the latter case, his residence when at home must be stated, in order that he may be accredited to the State or county to which he properly belongs, and that the county in which the institution is situated may not be charged with more than its due proportion of deaf-mutes.

NOTE B.—If self-supporting, say "yes;" if partly self-supporting, say "partly;" if not, say "no." Indicate all inmates of institutions who are maintained or treated at their personal expense (not at the expense of any town, county, or State, nor of the institution) by the word "Pay."

NOTE C.—If a deaf-mute from birth, say "B;" if not, state the age at which deafness occurred. *Special pains should be taken to indicate all deaf-mutes from birth.*

NOTE D.—The word "semi-mute" has a technical meaning, and denotes a deaf-mute who lost his or her hearing after having acquired at least a partial knowledge of spoken language. Some semi-mutes retain the ability to speak imperfectly, others lose it entirely. If a deaf-mute has ever learned to speak, he is a semi-mute; (unless he was artificially taught to speak in an institution for deaf-mutes.)

By a semi-deaf person is meant one who cannot hear sufficiently well to comprehend what is said to him, but who hears very loud sounds, such as thunder, &c.

NOTE E.—In making entries in columns 14, 15, and 16, an affirmative mark only will be used, thus: ✓

(4) Blind

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of the blind, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, *after making the proper entries upon the Population Schedule (No. 1)*, transfer the name (with Schedule page and number) of every blind person found, from Schedule No. 1 to this Special Schedule, and proceed to ask the *additional questions* indicated in the headings of the several columns.

Number taken from Schedule No. 1.		NAME.	Residence when at home. (See Note A.)		Is he (or she) self-supporting or partly so? (See Note B.)	Age at which blindness occurred. (See Note C.)	Form of blindness. (See Note D.)	Supposed cause of blindness, if known.	See Note F.		Institution life.				See Note F.		
Number of page.	Number of line.		City or Town.	County (if in same State), or State (if in some other State).					Is the person totally blind? (See Note E.)	Is the person semi-blind? (See Note E.)	Has this person ever been an inmate of an institution for the blind? If yes, give the name of such institution.	What has been the total length of time spent by him (or her) in any such institution?	Date of his (or her) discharge. (Year only.)	Is this person also insane?	Is he (or she) also idiotic?	Is he (or she) also deaf-mute?	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
47	21147	Beiton Henry D. Parkman	Geauga	Yes	67		Exposure	1									
		Young Thomas C. Parkman	Geauga	Yes	58		Hereditary	1									

NOTE F.—In making entries in columns 10, 11, 15, 16, and 17, an affirmative mark only will be used, thus: ☒

Defective, Dependent & Delinquent Classes (1880)

(5) Homeless Children

HOMELESS CHILDREN.

Received July 12, 1880.

C.

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of children in institutions, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, *after making the proper entries upon the Population Schedule (No. 1)*, transfer the name (with Schedule page and number) of every child found in any institution designed for the care of poor or homeless children, or in any poor-house or other asylum for the destitute, from Schedule No. 1 to this Special Schedule, and proceed to ask the *additional questions* indicated in the headings of the several columns. Special attention is called to the questions respecting the child's antecedents, which are designed to bring out the proportion of children in institutions who belong to the respectable and to the vicious classes severally.

Belong to the respectable and to the vicious classes following.																				
Number taken from Schedule No. 1.		NAME.	Residence when at home. (See Note A.)		Is this child's father deceased?	Is this child's mother deceased?	Has this child been abandoned by his (or her) parents?	Has this child's parents surrendered the control over him (or her) to the institution?	Was this child born in the institution?	If not so born, state year when admitted.	Is the child illegitimate?	Is this child separated from his or her (living) mother?	Antecedents.				(See Note B.)			
1	2		4	5									14	15	16	17	18	19	20	
1	822	Shores Frank	Tompson	Geauga	NO	NO	By him	yes		1878		NO	NO	NO	NO	NO	NO	NO	NO	NO
2	86	Heil	"	"	NO	NO	By him	yes		"		NO	"	"	"	"	"	"	"	"
3	28	Flourice	"	"	NO	NO	"	yes		"		NO	"	"	"	"	"	"	"	"
4	58	William	"	"	NO	NO	"	yes		"		NO	"	"	"	"	"	"	"	"
5	12	Carroll Ernest	Clanidan	"	NO	NO	"	yes	yes			NO	"	"	"	"	"	"	"	"
6																				
7																				
8																				
9																				
10																				
11																				
12																				

NOTE A.—Children in institutions may not be residents of the county or State in which the institution is situated, and in that case their residence when at home should be stated, in order that they may be accredited to the State or county to which they properly belong, and that the county in which the institution is situated may not be charged with more than its due proportion of dependent children.

NOTE B.—In making entries in columns 18, 19, and 20, an affirmative mark only will be used, thus: /.

Defective, Dependent & Delinquent Classes (1880)

(6) Inhabitants in Prison

INHABITANTS IN PRISON.

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of prisoners, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, *after making the proper entries upon the Population Schedule (No. 1)*, transfer the name (with schedule page and number) to this Special Schedule, and proceed to ask the *additional questions* indicated in the headings of the several columns.

In addition to the enumeration of prisoners required in this Special Schedule, enumerators will also, in all cases (even though there should not be any prisoners in confinement upon the first of June), ask the warden or keeper of every prison, station-house, or lock-up in their respective districts the questions found below, at the bottom of the page, respecting the number of prisoners in confinement *during the year ending May 31, 1880*, and record the answers.

Number taken from Schedule No. 1.		NAME.	Residence when at home.—(See Note A.)		Place of imprisonment: (State penitentiary or prison, county penitentiary or jail, work-house, house of correction, city prison, station-house, lock-up, or calaboose.)	Is this person a United States, State, or city prisoner? (If United States, see "U. S.")	Why in prison. (See Note B.)					Alleged offense.	Sentence.			Is this prisoner at hard labor? If yes, what? (Shoe shop, cigar shop, cooper shop, stone cutting, prison duties, mining, labor on farm or plantation, &c.)	If at hard labor, is he or she working inside or outside the prison walls?	Is he or her labor contrived only?				
Number of pages.	Number of line.		City or town.	County (if in same State), or State (if in some other State).			Is he or she awaiting trial?	Is he or she serving a term of imprisonment?	Is he or she serving out a day?	Is he or she sentenced to some higher prison and is he or she confined there?	Is he or she imprisoned for debt?		Is he or she imprisoned for insanity?	Amount of fine imposed.	Number of days in jail or workhouse.				Number of years in penitentiary.			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
1																						
2																						
3																						
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
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15																						
16																						
17																						
18																						
19																						
20																						
21																						
22																						
23																						
24																						

NOTE A.—Prisoners may not be residents of the county or State in which the prison, station-house, or lock-up is situated, and in that case their residence when at home, or the place where they were arrested or tried, should be stated, in order that they may be accredited to the State or county to which they properly belong, and that the county in which the prison, station-house, or lock-up is situated may not be charged with more than its due proportion of prisoners.

NOTE B.—In making entries in columns 8, 9, 10, 11, 12, 13, 14, and 15, an affirmative mark only will be used, thus: /

ADDITIONAL QUESTIONS to be asked of the chief executive officer of each and all prisons in the United States.

QUESTION 1.—What is the total number of persons who have been imprisoned in the _____ (a), in the county of _____, State of _____, during the year ending May 31, 1880? Answer: _____

QUESTION 2.—Of this total number, how many have been imprisoned in the said prison to serve out sentences imposed for crimes and misdemeanors? Total _____ Native white males, _____; native colored males, _____; native white females, _____; native colored females, _____; foreign males, _____; foreign females, _____.

QUESTION 3.—How many have been held upon other grounds, as debtors, witnesses, insane, or pending trial, without having been convicted of any offense? Total _____ Native white males, _____; native colored males, _____; native white females, _____; native colored females, _____; foreign males, _____; foreign females, _____.

QUESTION 4.—What is the total number of days' imprisonment during the year ending May 31, 1880, of all persons who have been confined in this prison? _____ (This number is to be found by adding the number of days' imprisonment of each prisoner and stating the sum.)

QUESTION 5.—Is payment made for maintenance of prisoners by a *per diem allowance* to the sheriff, jailor, or keeper? _____; and if yes, how many cents a day? _____; what was the total amount of this per diem allowance during the year ending May 31, 1880? \$ _____ If no such allowance is made, state the actual cost of maintenance of prisoners during the year. \$ _____

(a) Name the prison.

Defective, Dependent & Delinquent Classes (1880)

(7) "Pauper and Indigent Inhabitants in Institutions, Poor-Houses or Asylums, or Boarded at Public Expense in Private Houses"

6. PAUPER AND INDIGENT INHABITANTS IN INSTITUTIONS, POOR-HOUSES OR ASYLUMS, OR BOARDED AT PUBLIC EXPENSE IN PRIVATE HOUSES.

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of paupers, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, after making the proper entries upon the Preliminary Schedule, No. 1, transfer the names (with schedule page and number) to this Special Schedule and proceed to ask the additional questions indicated in the headings of the several columns. In case any person enumerated on this Special Schedule is blind, deaf and dumb, insane, or idiotic (see columns 20 to 24 inclusive), the particulars of such case will also be carried on such other Special Schedule, as the case may be. In addition to the enumeration of paupers required in this schedule, enumerators will also ask the keeper of every institution designed for the maintenance of the destitute the questions found below, at the bottom of the page, respecting the number of paupers during the year ending May 31, 1880, and record the answers.

Number of persons in the institution, poor-house, or asylum, or boarded at public expense in private houses, during the year ending May 31, 1880.		Residence when at home. (See Note A.)		How supported.		In this person's household?		Is he or she a pauper?		Is he or she a delinquent?		If disabled, state form of disability (deafness, blindness, insanity, etc., giving its date).		What other diseases of the body of this person are there? (See Note B.)		(New Note B.)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
<p><i>Angel County Infirmary</i></p> <p>5628</p>																	
1	16	London & Dudley	Hartshurst	Leamington	Yes	No	No	No	No	No	No	No	No	No	No	No	No
2	17	Parke & Hiram	Burton	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
3	18	Ray Alfred	Tombour	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
4	19	Whitman George	Chichester	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
5	20	Young Thomas	"	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
6	21	Whitman Solomon	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
7	22	Shore Frank	Tombour	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
8	23	Collins Edward	Chardon	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
9	24	Kang Moses	Tombour	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
10	25	Burton Mico	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
11	26	Flaming Thomas	Parkman	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
12	27	Freese Albert	Middlefield	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
13	28	Edley William	Tombour	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
14	29	Flaming Thomas	Parkman	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
15	30	House Alice	Burton	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
16	31	House Michael	Tombour	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
17	32	House Albert	Chardon	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
18	33	House George	Chichester	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
19	34	House Charles	Chardon	"	Yes	Yes	No	No	No	No	No	No	No	No	No	No	No
20	35	House Anna	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
21	36	House	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
22	37	House	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
23	38	House	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
24	39	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
25	40	House	Parkman	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
26	41	House	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
27	42	House	Tombour	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
28	43	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
29	44	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
30	45	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
31	46	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
32	47	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
33	48	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
34	49	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
35	50	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
36	51	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
37	52	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
38	53	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
39	54	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
40	55	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
41	56	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
42	57	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
43	58	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
44	59	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
45	60	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
46	61	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
47	62	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
48	63	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
49	64	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
50	65	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
51	66	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
52	67	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
53	68	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
54	69	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
55	70	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
56	71	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
57	72	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
58	73	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
59	74	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
60	75	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
61	76	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
62	77	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
63	78	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
64	79	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
65	80	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
66	81	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
67	82	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
68	83	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
69	84	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
70	85	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
71	86	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
72	87	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
73	88	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
74	89	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
75	90	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
76	91	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
77	92	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
78	93	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
79	94	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
80	95	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
81	96	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
82	97	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
83	98	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
84	99	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No
85	100	House	Chardon	"	Yes	No	No	No	No	No	No	No	No	No	No	No	No

NOTE A.—Paupers may not be residents of the county or State in which the institution designed for the maintenance of the destitute is situated, and in that case their residence when at home, on the place from whence they came to such institution, should be stated, in order that they may be returned to the State or county to which they properly belong, and that the county in which the institution is situated may not be charged with more than its due proportion of paupers.

NOTE B.—In making entries in columns 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, and 24, an affirmative mark only will be used, thus: "Yes" or "No," as the case may be. Columns 25, 26, 27, and 28 should be filled by inserting the numbers which correctly answer the query: How many sons, daughters, brothers, sisters, respectively, has this person, use the term (1).

ADDITIONAL QUESTIONS TO BE ASKED OF THE CHIEF EXECUTIVE OFFICER OF EACH AND ALL PAUPER ESTABLISHMENTS (INCLUDING HOUSES AND ASYLUMS FOR THE DESTITUTE, AND FOR THE FRIENGLAND) IN THE UNITED STATES.

QUESTION 1. What is the total number of persons who have been inmates of this institution at any time for a longer or shorter period, during the year ending May 31, 1880?—Answer. Total. 5628; native white males, 54; native colored males, 12; native white females, 12; native colored females, 12.

QUESTION 2. What is the total number of days' board furnished to inmates during the year ending May 31, 1880?—Answer. 12274. (This number is to be found by taking the sum of the number of days' board furnished to each inmate. By 41 board is meant the number of days during which each person was retained as an inmate.)

QUESTION 3. If persons in this establishment are supported at the expense of the town, county, or State, in payment made for their maintenance by a weekly or monthly allowance to the keeper?—Answer. Yes, how much in the said district?—Answer. \$125.00 per quarter.

QUESTION 4. If so, what allowance is made, what was the actual cost of maintenance of pauper or destitute inmates of the institution during the year ending May 31, 1880?—Answer. \$50.00.

NOTE.—The enumeration of each class will also show, if possible, and state the name of the keeper, superintendent, overseer, poor master, or other town, city, or county officer who is charged with the relief of the poor at their own homes or elsewhere outside of institutions, in order that inquiries may be hereafter addressed to them (by mail) respecting the amount and cost of support only.

Defective, Dependent & Delinquent Classes (1880)

D. PAUPER AND INDIGENT INHABITANTS IN INSTITUTIONS, POOR-HOUSES OR ASYLUMS, OR BOARDED AT PUBLIC EXPENSE IN PRIVATE HOUSES.

The object of this Supplemental Schedule is to furnish material not only for a complete enumeration of paupers, but for an account of their condition. It is important that every inquiry respecting each case be answered as fully as possible. Enumerators will, therefore, after making the proper entries upon the Population Schedule (No. 1), transfer the name (with schedule page and number) to this Special Schedule and proceed to ask the additional questions indicated in the headings of the several columns. In case any person enumerated on this Special Schedule is blind, deaf and dumb, insane, or idiotic (see columns 25 to 28 inclusive), the particulars of such case will also be carried on such other Special Schedule, as the case may be. In addition to the enumeration of paupers required in this Schedule, enumerators will also ask the keeper of every institution designed for the maintenance of the destitute the questions found below, at the bottom of the page, respecting the number of paupers during the year ending May 31, 1880, and record the answers.

Number taken from Schedule No. 1.		NAME	Residence when at home. (See Note A.) City or town. County (if in same State), or State (if in some other State).	How supported? (See Note B.)				Is this person able-bodied?	Is he (or she) habitually intemperate?	Is he (or she) epileptic?	Has he (or she) ever been convicted of a crime?	If disabled, state form of disability (crippled, consumption, dropsy, old age, lying-in, etc.).	Was this person born in this institution? (See Note B.)	Date of admission. (Give day of month and year, thus: Jan. 15, 76.)	What other members of the family of this person are in this establishment? (See Note B.)											
1	2			6	7	8	9								10	11	12	13	14	15	16	17	18	19	20	21
Geauga County Infirmary -		5628																								
1	8	16	Loveland Dudley	Huntburgh	Geauga	/			Yes	No	No	No		Sept 2, 77	X											
2	17		Parkes Hiram	Barton	"	/			Yes	No	No	No		Feb 5, 77	X											
3	18		King Alfred	Tompson	"	/			Yes	Yes	No	No		Jan 8, 77												
4	19		Whitman George	Chiter	"	/			Yes	Yes	No	No		Sept 22, 74												
5	20		Howay Thomas	"	"	/			Yes	No	No	No		July 15, 74												
6	21		Butcher Solomon	Tompson	"	/			Yes	No	No	No		May 22, 75												
7	22		Shore Frank	Tompson	"	/			Yes	Yes	No	No		Nov 6, 78												
8	23		Collins Edward	Chardon	"	/			Yes	Yes	No	No		Nov 25, 75												
9	24		King Moses	Tompson	"	/			Yes	Yes	No	No		Jan 2, 77												
10	25		Barium Michael	Tompson	"	/			Yes	No	No	No		Dec 7, 75	X											
11	26		Flumming Thomas	Parkman	"	/			Yes	Yes	No	No		Apr 4, 79												
12	27		Beas Abram	Middlefield	"	/			Yes	No	No	No		June 2, 77	X											
13	28		Sidley William	Tompson	"	/			Yes	Yes	No	No		Apr 5, 75	X											
14	29		Flumming Francis	Parkman	"	/			Yes	Yes	No	No		May 12, 68												
15	30		Hough Elias	Barton	"	/			Yes	Yes	No	No		Jan 2, 74												

Same people on population schedule

NOTE D.—In making entries in columns 9, 10, 11, 12, 13, 14 or 15, an affirmative mark only will be used—namely, “/”, except in the case of divorced persons, column 11, when the letter “D” is to be used.

NOTE E.—Question No. 12 will only be asked in cases where an affirmative answer has been given either to question 10 or to question 11.

NOTE F.—Question No. 13 will only be asked in cases where a married association has been reported in column 12.

Enumerator.

[illegible]

1935 Census of Business

M1797. Schedules of Advertising Agencies (1 roll)

M2066. Schedules of Banking and Financial Institutions (31 rolls)

M2067. Schedules of Miscellaneous Enterprises (43 rolls)

M2068. Schedules of Motor Trucking for Hire (103 rolls)

M2069. Schedules of Public Warehousing (6 rolls)

M2070. Schedules of Radio Broadcasting Stations (1 roll)

Generally arranged by state, then by county, then by locality

1935 Census of Business

M2067. Schedules of Miscellaneous Enterprises (43 rolls)

2 page form

2

CONFIDENTIAL GOVERNMENT REPORT

Section 8 of the Act creating the Department of Commerce and Labor, approved February 14, 1925, provides that: "The Secretary of Commerce shall from time to time make such special investigations and reports as he may deem necessary and urgent." Acting upon this authority, I have authorized and instructed the Director of the Census to take a Census of Business covering the calendar year 1935. We ask for the cooperation and assistance of the business men of the United States in this undertaking and assure them that their individual reports will be held absolutely confidential. Only sworn employees of the Bureau of the Census will be permitted to examine your report, and no information will be given to any person, whether in Government service or private life, which would disclose, directly or approximately, any of the facts or figures in your report. The information will be used for statistical purposes only.

DANIEL C. ROPER, Secretary of Commerce.

Form of
Census of Business
Miscellaneous Enterprises

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

MISCELLANEOUS
SCHEDULE

CENSUS OF BUSINESS: 1935

Supervisor's District No. 22
State Ohio
Enumeration District No. 28
County Franklin
Consecutive Number of Entry No. 88

A report should be prepared on this form for each business office or establishment involving paid employees coming within the scope of the Census of Business but for which no provision has been made on other schedules. Nonprofit organizations and associations of all types—trade associations, trade unions, chambers of commerce, fraternal organizations, clubs, civic and patriotic organizations, professional associations, social service agencies, foundations, etc., should report on this form. The report should exclude, however, nurseries, schools, lodging places, camps, asylums, or similar institutions which may be operated by the organization. Commercial activities of such organizations or associations such as hotels, operating companies, amphytheatres, museums, etc., should be reported on the proper census forms.

A separate report should be prepared on this form for each building having an operating personnel of its own and used principally for other than residential purposes and occupied continuously by persons in office of 10 or more.

The report should cover a full year's operation for the calendar year 1935, even if ownership has changed during the year. If more convenient, a twelve-month period ending within a month before or after December 31, 1935, may be covered.

1. DESCRIPTION OF ESTABLISHMENT:

a. LOCAL NAME OF ESTABLISHMENT (ORGANIZATION OR BUILDING) Franklin County Club
State Ohio County Franklin Township Claridon
Name of city, town, or village Claridon
Street and number Middlefield Rd.
Is this street and number located within the corporate limits of the city, town, or village named above?
(Yes or No) No

b. LOCATION OF ESTABLISHMENT

c. IF THIS ORGANIZATION IS A BRANCH OF A NATIONAL, REGIONAL, OR STATE ORGANIZATION, GIVE NAME AND ADDRESS OF THE PARENT BODY

(TO BE ANSWERED ONLY BY OWNER-OPERATORS OR MANAGING AGENCIES OF NONRESIDENTIAL BUILDINGS)

d. NAME OF OWNER-OPERATOR, OR MANAGING AGENCY FOR THIS BUILDING Ohio Rail Co.

e. ADDRESS (HOME-OFFICE OR BUSINESS ADDRESS) OF OWNER-OPERATOR, OR MANAGING AGENCY FOR THIS BUILDING Middlefield, Ohio

f. NUMBER OF NONRESIDENTIAL BUILDINGS MANAGED BY THIS OWNER-OPERATOR, OR MANAGING AGENCY (including the building covered in this report) 1

(1) 32
(2) 3
(CODE—Do Not Use)

2. KIND OF BUSINESS:

Specify the kind of organization, business, or nonresidential building covered in this report

3. PAID EMPLOYEES AND PAY ROLLS:

a. Total number of paid employees in the pay period ending nearest October 26, 1935 (Seasonal establishments, or buildings with a seasonal occupancy will report for a seasonal pay period of the active season.)

Males	<u>4</u>	A-1
Females		A-2
TOTAL NUMBER	<u>4</u>	A-3

b. Number of part-time employees included in 3a above

c. How many of the total employees reported under 3a are Negroes?

d. Total pay roll for the year 1935 (salaries, wages, bonuses, and commissions, after all deductions) \$2,040.

e. How much of the total pay roll (3d above) was paid to part-time employees?

A-4
A-5
A-6
A-7

1935 Census of Business

M2067. Schedules of
Miscellaneous
Enterprises (43 rolls)

Number of paid employees (full-time and part-time combined) working during the pay period ending nearest the 15th of each month of 1935:

Month, 1935	Number	Row	Month, 1935	Number	Row
January		B-1	July	4	F
February		1	August	4	2
March		2	September	4	3
April	4	3	October		4
May	4	4	November		5
June	4	5	December		6
			(Do not omit)	24	6-6

REMARKS: *Trans from Form 46*

CERTIFICATE

THIS IS TO CERTIFY that the information contained in this schedule is correct and complete to the best of my knowledge and belief, and covers the period from *Apr 15*, 19*35* to *Oct 1*, 19*35*

Art. Chalmers (Ref/Pro)
(Signature and official title of person furnishing the information)

Jos. Huccainullo
(Signature of enumerator)

5-8, 1935
(Date of signature)

U. S. GOVERNMENT PRINTING OFFICE

1935 Census of Business

M2067. Schedules of Miscellaneous Enterprises (43 rolls)

1

CONFIDENTIAL GOVERNMENT REPORT

Section 8 of the Act creating the Department of Commerce and Labor, approved February 14, 1903, provides that: "The Secretary of Commerce shall from time to time make such special investigations and reports as he may deem necessary and useful." Acting upon this authority, I have authorized and instructed the Director of the Census to make a Census of Business covering the calendar year 1935. We ask for the cooperation and assistance of the business men of the United States in this undertaking and assure them that their individual reports will be held absolutely confidential. Only direct employees of the Bureau of the Census will be permitted to examine your report, and no information will be given to any person, whether in Government service or private life, which would disclose, exactly or approximately, any of the facts or figures in your report. The information will be used for statistical purposes only.

DANIEL C. ROPER, Secretary of Commerce.

BUREAU OF THE CENSUS
WASHINGTON

CENSUS OF BUSINESS: 1935

A report should be prepared on this form for each business office or establishment employing paid employees coming within the scope of the Census of Business of commerce, except as otherwise provided. Nonprofit organizations and associations of all types—trade associations, chambers of commerce, trade unions, etc., should report on this form. The report should exclude, however, any schools, hospitals, clinics, lodging places, camps, asylums, or similar institutions which may be operated by the organization. Commercial activities of such organizations or associations such as hotels, sporting companies, group-buying societies, etc., should be reported on the proper census forms.

A separate report should be prepared on this form for each building having an operating personnel of its own and used principally for other than residential purposes—if not occupied exclusively by nonresidential uses of 10,000 or more.

The report should cover a full year's operation for the calendar year 1935, even if ownership has changed during the year. If more convenient, a twelve-month period ending within a month before or after December 31, 1935, may be covered.

1. DESCRIPTION OF ESTABLISHMENT:

a. LOCAL NAME OF ESTABLISHMENT (ORGANIZATION OR BUILDING) Bentleyville Camp (YMCA)

State Ohio County Shawnee Township Bainbridge

b. LOCATION OF ESTABLISHMENT

Name of city, town, or village Wilmington (?)

Street and number _____

Is this street and number located within the corporate limits of the city, town, or village named above? (Yes or No) Yes

c. IF THIS ORGANIZATION IS A BRANCH OF A NATIONAL, REGIONAL, OR STATE ORGANIZATION, GIVE NAME AND ADDRESS OF THE PARENT BODY

YMCA of Cleveland
2250 Prospect Ave

(TO BE ANSWERED ONLY BY OWNER-OPERATORS OR MANAGING AGENCIES OF NONRESIDENTIAL BUILDINGS)

d. NAME OF OWNER-OPERATOR, OR MANAGING AGENCY FOR THIS BUILDING _____

e. ADDRESS (HOME-OFFICE OR BUSINESS ADDRESS) OF OWNER-OPERATOR, OR MANAGING AGENCY FOR THIS BUILDING _____

f. NUMBER OF NONRESIDENTIAL BUILDINGS MANAGED BY THIS OWNER-OPERATOR, OR MANAGING AGENCY (including the building covered in this report)

(1) 45
(2) 6
(CODE—Do Not Use)

2. KIND OF BUSINESS:

Specify the kind of organization, business, or nonresidential building covered in this report YMCA Camp

3. PAID EMPLOYEES AND PAY ROLLS:

a. Total number of paid employees in the pay period ending nearest October 26, 1935. (Business establishments or buildings with a seasonal occupancy will report for a normal pay period of the active season.)

Males	<u>13</u>	A-1
Females	<u>3</u>	A-2
TOTAL NUMBER	<u>16</u>	A-3

b. Number of part-time employees included in 3a above. _____ A-4

c. How many of the total employees reported under 3a are Negroes? none A-5

d. Total pay roll for the year 1935 (salaries, wages, bonuses, and commissions, after all deductions) \$ 4,478 A-6

e. How much of the total pay roll (3d above) was paid to part-time employees? \$ 1,677 A-7

1935 Census of Business

M2067. Schedules of
Miscellaneous
Enterprises (43 rolls)

Number of paid employees (full-time and part-time combined) working during the pay period ending nearest the 15th of each month of 1935.

Month, 1935	Number	Month, 1935	Number	Month, 1935	Number
January	1	July	20	January	1
February	1	August	16	February	2
March	1	September	12	March	3
April	5	October	2	April	4
May	5	November	3	May	5
June	17	December	2	June	6
		(Do not use)	85		1-3 B(C)-1

REMARKS: *Transferred from cover 41.*

CERTIFICATE

THIS IS TO CERTIFY that the information contained in this schedule is correct and complete to the best of my knowledge and belief, and covers the period from *Jan 1, 1935* to *Dec 31, 1935*

(Signed) *H. J. Quinn* ¹²¹ *and Treas*
(Signature of person furnishing the information)

Apr 4, 1936
(Date of signature)

(Signed) *Lawrence A. Roelle*
(Signature of enumerator)

U. S. GOVERNMENT PRINTING OFFICE

1935 Census of Business

M2067. Schedules of Miscellaneous Enterprises (43 rolls)

518 **CONFIDENTIAL GOVERNMENT REPORT**

Section 8 of the Act creating the Department of Commerce and Labor, approved February 14, 1933, provides that: "The Secretary of Commerce shall from time to time make such special investigations and reports . . . which he himself may deem necessary and urgent." Acting upon this authority, I have authorized and instructed the Director of the Census to take a Census of Business covering the calendar year 1935. We ask for the cooperation and assistance of the business men of the United States in this undertaking and assure them that their individual reports will be held absolutely confidential. Only sworn employees of the Bureau of the Census will be permitted to examine your report, and no information will be given to any person, whether in Government service or private life, which would disclose, exactly or approximately, any of the facts or figures in your report. The information will be used for statistical purposes only.

DANIEL C. ROPER, Secretary of Commerce.

PAGE 47
CENSUS OF BUSINESS
Business Week Project

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

MISCELLANEOUS
SCHEDULE

CENSUS OF BUSINESS: 1935

A report should be prepared on this form for each business office or establishment involving paid employees coming within the scope of the Census of Business but for which no provision has been made on other schedules. Nonprofit organizations and associations of all types—trade associations, trade unions, chambers of commerce, fraternal organizations, clubs, civic and patriotic organizations, professional associations, research organizations, social service agencies, foundations, etc., should report on this form. The report should contain, however, not schools, hospitals, clinics, lodging places, camps, asylums, or similar institutions which may be operated by the organization. Commercial activities of such organizations or associations such as hotels, operating companies, symphony orchestras, museums, etc., should be reported on the proper census forms.

A separate report should be prepared on this form for each building having an operating personnel of its own and used principally for other than residential purposes—if not occupied exclusively by owner—in excess of 10,000 or more.

The report should cover a full year's operation for the calendar year 1935, even if ownership has changed during the year. If more convenient, a twelve-month period ending within a month before or after December 31, 1935, may be covered.

1. DESCRIPTION OF ESTABLISHMENT:

a. LOCAL NAME OF ESTABLISHMENT (ORGANIZATION OR BUILDING) Blue Swan Club

State Ohio County Cuyahoga Township -

Name of city, town, or village Cleveland

b. LOCATION OF ESTABLISHMENT

Street and number 2890 E. 116 St.

Is this street and number located within the corporate limits of the city, town, or village named above?
(Yes or No) Yes

c. IF THIS ORGANIZATION IS A BRANCH OF A NATIONAL, REGIONAL, OR STATE ORGANIZATION, GIVE NAME AND ADDRESS OF THE PARENT BODY 110

TO BE ANSWERED ONLY BY OWNER-OPERATORS OR MANAGING AGENCIES OF NONRESIDENTIAL BUILDINGS:

d. NAME OF OWNER-OPERATOR, OR MANAGING AGENCY FOR THIS BUILDING Blue Swan Club

e. ADDRESS (HOME-OFFICE OR BUSINESS ADDRESS) OF OWNER-OPERATOR, OR MANAGING AGENCY FOR THIS BUILDING 2890 E. 116 St.

f. NUMBER OF NONRESIDENTIAL BUILDINGS MANAGED BY THIS OWNER-OPERATOR, OR MANAGING AGENCY one

(including the building covered in this report)

(1) 33
(2) ✓
(CODE—Do Not Use)

2. KIND OF BUSINESS:

Specify the kind of organization, business, or nonresidential building covered in this report Private Club
Beer parlor

3. PAID EMPLOYEES AND PAY ROLLS:

	Male	Female	TOTAL NUMBER	Key
a. Total number of paid employees in the pay period ending nearest October 26, 1935 (Seasonal establishments, or buildings with a seasonal occupancy will report for a normal pay period of the active season.)	2		2	A-1
b. Number of part-time employees included in 3a above			1	A-2
c. How many of the total employees reported under 3a are Negroes?			0	A-3
d. Total pay roll for the year 1935 (salaries, wages, bonuses, and commissions, after all deductions)			\$ 1,187	A-4
e. How much of the total pay roll (3d above) was paid to part-time employees?			\$ 192	A-5

2001

1935 Census of Business

M2067. Schedules of
Miscellaneous
Enterprises (43 rolls)

Number of paid employees (full-time and part-time combined) working during the pay period ending nearest the 15th of each month of 1935:

Month, 1935	Number	Key	Month, 1935	Number	Key
January	<u>2</u>	B-1	July	<u>2</u>	B-2
February	<u>2</u>	1	August	<u>2</u>	1
March	<u>2</u>	2	September	<u>2</u>	2
April	<u>2</u>	3	October	<u>2</u>	3
May	<u>2</u>	4	November	<u>2</u>	4
June	<u>2</u>	5	December	<u>2</u>	5
			(Do not use)	24	A-6 B(2)-7

REMARKS: *this is a non profitable organization mainly
designed around for recreational purposes and
cultural pursuit (concerts, for instance)*

CERTIFICATE

THIS IS TO CERTIFY that the information contained in this schedule is correct and complete to the best of my knowledge and belief, and covers the period from January 1, 1935 to December 31, 1935

Stephen Pink Lubin
(Signature and official title of person furnishing the information)

28-36, 1935
(Date of signature)

Wm. Luchinski
(Signature of enumerator)

U. S. GOVERNMENT PRINTING OFFICE

1935 Census of Business

M2067. Schedules of Motor Trucking for Hire (103 rolls)

Page 1 of 4 pages

A13X: 11X

CONFIDENTIAL GOVERNMENT REPORT

Section 3 of the Act creating the Department of Commerce and Labor, approved February 14, 1903, provides that: "The Secretary of Commerce shall from time to time make such special investigations and reports as he may deem necessary and urgent." Acting upon this authority, I have authorized and instructed the Director of the Census to take a Census of Business covering the calendar year 1935. We ask for the cooperation and assistance of the business men of the United States in this undertaking and assure them that their individual reports will be held *absolutely confidential*. Only sworn employees of the Bureau of the Census will be permitted to examine your report, and no information will be given to any person, whether in Government service or private life, which would disclose, exactly or approximately, any of the facts or figures in your report. The information will be used for statistical purposes only.

DANIEL C. ROPER, Secretary of Commerce.

Form 78
CENSUS OF BUSINESS
Federal Works Project

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

MOTOR TRUCKING AND OR
WAREHOUSING

SUPERVISOR'S DISTRICT
No. 22
State *Ohio*
ENUMERATION DISTRICT
No. 257
County *Shawnee*
CONSECUTIVE NUMBER
OF REPORT
No. 73

CENSUS OF BUSINESS: 1935

A report on this form should be prepared for: (1) each concern whose principal business is trucking for hire, and (2) each establishment or place of business operated by a warehouse concern.

For a trucking concern one report should be made covering all operations in the continental United States. For a warehouse concern, a separate report should be prepared for each warehouse. If more convenient, a combined report may be made covering two or more warehouses located in the same city, but the street address of each should be given under "Remarks", at the end of the schedule.

The report should cover, if possible, the full year's operations for the calendar year 1935, even if ownership has changed during the year. If more convenient the report may cover a twelve-month period ending within a month before or after December 31, 1935.

1. DESCRIPTION OF CONCERN:

a. NAME OF CONCERN OR ESTABLISHMENT *H. J. Lee Trucking*

b. NAME OF OWNER *H. J. Lee* PLACE (not for corporations) *White*
(White, Negro, Oriental, other)

c. LOCATION OF PRINCIPAL OR HOME OFFICE OF CONCERN OR LOCATION OF ESTABLISHMENT State *Ohio* County *Shawnee* Township *Chatham*
City, town, or village *Paris*
Street and number *Munson Rd.*
Is this street and number located within the corporate limits of the city, town, or village? (Yes or No) *Yes*

d. FORM OF ORGANIZATION ☒ Individual proprietorship ☐ Corporation
(Place check mark in proper square) ☐ Partnership ☐ Other (specify)

2. KIND OF BUSINESS.—Indicate the kind of business from which you obtained the major portion of total revenue in 1935. Check only one square, either under a or b:

a. Warehousing or storage:
☐ Household goods. ☐ Farm products. ☐ Other (specify):
☒ General merchandise. ☐ Cold storage.

☒ Trucking for hire:
☒ Local (operating within one city and immediately surrounding area).
☐ Intra-state (operating within one State, but beyond home city and surrounding area).
☐ Interstate (operating between two or more States, but beyond home city and surrounding area).

c. List other business activities in which this concern is engaged.

(1) *2*
(2) *1*
(Code—Do not use)

3. CLASS OF TRUCKING OPERATION (not applicable to warehousing concerns):
Specify the class of trucking operation, which is the most important on the basis of revenue for 1935. Check one:

☐ a. Operating under agreements with shippers over a definite period of time.

☒ b. Accepting shipments from public:
☐ 1. On substantially regular routes and schedules.
☒ 2. Other than b 1, above.

☐ c. Other (specify): *Also hauling coal from mine.*

(5) *2*
(6) *3*
(7) *1*
(8) *0*
(Code—Do not use)

31204

1935 Census of Business

M2067. Schedules of Motor Trucking for Hire (103 rolls)

Page 2 of 4 pages

4. OPERATING REVENUE FOR 1935:		Key
a. Total receipts from warehousing or storage operations.....	\$	E-1
b. Total receipts from trucking and cartage for hire:		
1. From local operations.....	\$	E-2
2. From intrastate operations.....	\$	E-3
3. From interstate operations.....	\$	E-4
4. Total (sum of 1, 2, and 3).....	\$	E-5
c. Total receipts from freight terminal operations.....	\$	E-6
d. Total receipts from transportation of passengers.....	\$	E-7
e. Other operating revenues (specify sources).....	\$	
f. Total operating revenue (sum of a, b, c, d, and e).....	\$ 3690.00	A-1

5. OPERATING EXPENSES:		Key
a. Total pay roll for the year 1935 for full-time and part-time employees (salaries, wages, bonuses, and commissions, after all deductions).....	\$ 480.00	A-2
b. All other operating expenses (supplies, depreciation, insurance, overhead, and all other operating expenses except pay roll).....	\$ 670.00	A-3
c. Total operating expenses (a plus b).....	\$ 2190.00	B-1
d. How much of the total pay roll (a; above) was paid to part-time employees?.....	\$ 480.00	B-2
e. Total depreciation for 1935 included in b. above.....	\$	A-4

6. PROPRIETORS AND FIRM MEMBERS (Does not apply to corporations):		Key
a. Total number of proprietors and firm members (including those reported under b. below).....	1	B-3
b. Number of active proprietors and firm members devoting major portion of their time to the business.....	1	B-4
c. Number of members of families of proprietors or firm members who are regularly working full-time or part-time, in the business, but to whom no stated salary is paid:		
Number 18 years of age or over.....		B-5
Number under 18 years of age.....		B-6

7. PAID EMPLOYEES AND WEEKLY PAY ROLLS:		EMPLOYMENT AND PAY ROLL DATA FOR FULL-TIME AND PART-TIME EMPLOYEES FOR ONE WEEK ONLY			
(Do not include in this inquiry persons reported in Inquiry 6, above.)		(Give figures for week ending Oct. 26, 1935. For highly seasonal businesses, report instead one week of normal employment during active season.)			
		Full-time		Part-time	
		Number of paid full-time employees during the week	Pay roll for the week for full-time employees (salaries, wages, bonuses, and commissions)	Number of paid part-time employees during the week	Pay roll for the week for part-time employees (salaries, wages, bonuses, and commissions)
ITEM	Field 1	Field 2	Field 3	Field 4	Field 5
a. Executives and salaried corporation officers.....	C-1	\$		\$	
b. Office and clerical employees.....	C-2	\$		\$	
c. Warehousing and platform employees.....	C-3	\$		\$	
d. Transportation crews (drivers, helpers, etc.).....	C-4	\$		\$	
e. Employees engaged in maintaining and servicing equipment (tracks, refrigeration, etc.).....	C-5	\$		\$	
f. All other employees.....	C-6	\$		\$	
g. TOTAL (sum of a, b, c, d, e, and f).....	C-7	\$		\$	

A. How many of the total number of employees shown above (full-time and part-time combined) are		Key
Male.....		C(7)-5
Female.....		C(7)-6
B. How many of the total number of employees shown above (full-time and part-time combined) are Negroes?		B-7

(2)

360 B-8

Page 4 of 4 pages

[illegible]

History of Census

- Forms Used
- Questions Asked
- Instructions to Enumerators

Carol Wright, *The History and Growth of the United States Census, 1790–1890* (1900; repr. 1966)

Online at

<https://www.census.gov/history/pdf/wright-hunt.pdf>



V I R T U A L
GENEALOGY FAIR



**Presenter didn't
get to your question?**

**You may email us at
*inquire@nara.gov***