

# THE MARION PROGRESS

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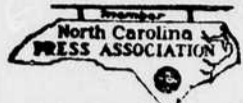
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### SUBSCRIPTION RATE

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## MAYBE NOT TODAY— BUT WHAT ABOUT TOMORROW?

Not today, perhaps, but tomorrow you may need hospital facilities. And when you need the hospital, there is nothing more important. Today you probably are not particularly concerned about the need for adequate hospitalization in McDowell county and the financial campaign to raise \$100,000—the local amount needed to build a new \$700,000 hospital with state and federal aid under the Good Health Plan.

But tomorrow, an emergency may jolt you into realization of the importance of adequate hospital facilities in the county. Most hospital cases are emergencies—no one can foretell when he may need surgical or medical care in a hospital, and when there is need, there must be a hospital bed available immediately.

The Marion General Hospital has 41 out of 42 beds filled daily—which means that there is only one bed available for emergency cases. The American Hospital Association requires at least 15% of a hospital's beds to be available for emergencies.

Severe illness may come at any time, without warning, and an accident can place you or someone in your family in immediate need of hospital treatment. At such time, the hospital must be ready; it MUST be large enough so that no one will be kept waiting, so that not a single life may be placed in jeopardy or lost due to a lack of facilities.

If the people of McDowell county will give and give generously to the hospital fund, the new Marion General Hospital will eliminate such dangers.

Just as there is no need for fire equipment until there is a fire, and police system unless there is a crime, so there is no need for a hospital until there is an illness or an accident—but common sense tells us that all such facilities must be there and must be maintained for the protection and welfare of the people.

Our schools, courts, fire departments, law enforcement agencies, sewer and water systems, all are provided by taxation, but the Marion General Hospital is not. Yet who can say that it is just as important as the tax-supported facilities?

It is for the same reason that there is no tax support that the Board of Trustees of the non-profit Marion General Hospital find it necessary to campaign for funds to erect and maintain the new hospital.

Advancements in treatment of diseases and in surgery have brought about a steady increase in needs for hospitalization.

McDowell county has not kept pace with the trend in this phase of community service. That is why the Marion General Hospital is now taking steps to provide McDowell people with the adequate hospitalization which they need.

The new Marion General Hospital will be a McDowell county proposition in every respect—a hospital by and for the people of McDowell county. It can be built only if the local people put up their share of the money. Generous state and federal grants amounting to 68.5 per cent of the total cost are available if the county raises the needed \$100,000.

Subscription has proved to be the most practical way of building hospital facilities in our modern life. It is quite reasonable to expect the required funds to be furnished by the people who need the hospital for their own protection. What could be fairer? The county is asking no increase in your taxes.

Subscribing to the Marion General Hospital is not giving to the hospital, but to ourselves, through the hospital.

Marion General Hospital needs you today. Tomorrow, you may need the hospital!

Here's the latest prediction: "Good business is certain in 1950, barring major upsets." Figure out for yourself whether there is going to be any major upsets.

A home town booster is a man that helps make his home town better as well as bigger.

## AIDING TB RESEARCH

Research and education have gone hand in hand in the fight to conquer tuberculosis. Both have been essential to the progress so far made and both will play important roles in whatever progress is made in the future.

Through the one, our scientific knowledge about the disease, its cause, treatment, and prevention, has been increased. Through the other, vast numbers of people have been reached with the fruits of research—with practical information on the treatment and prevention of tuberculosis.

Most of us are aware how education has helped people understand that tuberculosis is not inherited but is a contagious disease; that tuberculosis is not necessarily fatal but that it can be cured; that tuberculosis is easiest to cure in an early stage.

Less familiar to most of us, perhaps, is the story of scientific study which preceded our education on these points. For example, the heredity theory of tuberculosis could not be exploded until the real cause of tuberculosis was determined—until the tuberculosis bacillus was discovered in 1882 and was proved to be the cause of tuberculosis.

A great deal of important scientific information about tuberculosis has been accumulated since 1882, but there is still much to be learned about this disease before we can expect to conquer it completely.

For example, we do not know how to attack the tuberculosis germ directly in the human body. We do not fully understand the process which leads to the formation of cavities in the lungs of tuberculosis patients. We do not know how to prevent germs from becoming resistant to drugs sometimes used in tuberculosis treatment.

The answers to these and many other puzzling questions sought by scientific investigators who are among 22 currently being aided by grants from the National Tuberculosis Association and its 3,000 affiliates, including the McDowell County Tuberculosis Association.

Funds for the research grants are derived from proceeds from the sale of Christmas Seals. Thus, all of us who purchase Christmas Seals are actually sponsoring research which may prove of inestimable value in the conquest of a deadly disease.

And at the same time our Christmas Seal dollars are aiding scientific study, they are also supporting the well planned, year-round program of education, case finding, and rehabilitation conducted in this community by the McDowell County Tuberculosis Association.

From the immediate and long-range viewpoints, Christmas Seals are a sound investment.

## FEDERAL DEFICIT AHEAD

An official review of the Federal budget indicates a deficit of \$5,500,000,000 in this fiscal year instead of \$900,000,000 deficit forecast by the President in his January message to Congress.

The deficit is explained by an increase of \$1,600,000,000 in expenditures and a prospective decline of \$3,000,000,000 in receipts due to a declining national income. The other \$900,000,000 represents the deficit predicted by the President last winter.

The prospective deficit compares with one of \$1,800,000,000 in the 1949 fiscal year, which ended last June 30th, and surpluses of \$8,400,000,000 in the 1948 fiscal year and \$754,000,000 in the 1947 accounting period.

While there may be many explanations for the deficit that looms ahead, it should be apparent to the people of this country, and to those in official position, that the United States cannot operate permanently on a deficit basis. While it is impossible to say exactly how far the national debt can safely go, no gift of prophecy is necessary to state that it cannot go on forever.

## REFUNDS TO VETERANS

Beginning in January, the Veterans Administration will distribute some \$2,800,000,000 to approximately 16,000,000 veterans.

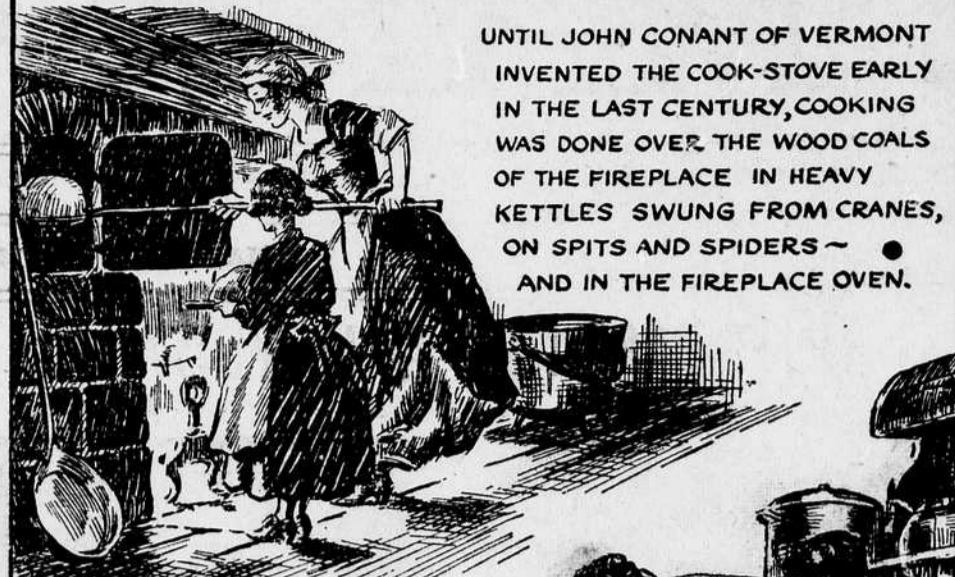
The refund represents a return of premiums paid on service life insurance policies and will range from ninety cents to \$528, depending upon the amount of insurance the veteran carried and the length of time he paid premiums.

It will take some time to mail checks to all the veterans entitled to refunds. In order to be fair to all entitled to payments, the VA will use the last three digits of the veterans' serial numbers as a guide to the mailing of checks. This means that those whose serial numbers end with 000 come first, those with 001 come next and those with 999 come last. The method, it is said, places officers and men on the same basis.

The way to get it, is to get out and get it, not sit down and wait for it to come in.

No matter how long it may be devalued, there are those who like to possess currency.

## OUR DEMOCRACY—by Mat INGENUITY MAKES BETTER LIVING



UNTIL JOHN CONANT OF VERMONT INVENTED THE COOK-STOVE EARLY IN THE LAST CENTURY, COOKING WAS DONE OVER THE WOOD COALS OF THE FIREPLACE IN HEAVY KETTLES SWUNG FROM CRANES, ON SPITS AND SPIDERS— AND IN THE FIREPLACE OVEN.

CONANT'S INVENTION WAS REVOLUTIONARY IN BROADENING THE SCOPE OF HOME COOKING... THE DEVELOPMENT OF ITS BASIC PRINCIPLES—ITS ADAPTATION TO OTHER FUELS—HAS TREMENDOUSLY SIMPLIFIED COOKING FOR THE HOMEMAKER OF TODAY.



THE COOK-STOVE IS ONE OF THE MANY CONTRIBUTIONS OF AMERICAN INGENUITY AND ENTERPRISE TO THE EASE AND COMFORTS OF FAMILY LIVING IN THIS COUNTRY AND THROUGHOUT THE WORLD.

## THE ROSE - Facts About Planting

By Mrs. J. H. Tate

Some facts about roses gleaned from reading E. R. Roger's Garden Calendar:

Robers writes—"Roses will thrive in almost any kind of soil, provided it is well drained, fertile and retentive of moisture. They like clay about the roots and a good loose, porous soil on top. As an old gardener once put it 'They like tight shoes and a loose collar.'"

Dig deep (18 inches or 2 feet) break up the bottom into large pieces such as old straw manure, half-rotted straw, compost or cornstalks. Over this use a mixture of old manure, good garden soil with some clay, if the soil is sandy, and superphosphate at the rate of 3 to 5 pounds per 100 square feet. Mix thoroughly, fill over this with about 3 to 4 inches of loose soil which can be a mixture of garden woodsear, crumbly compost, or very old manure. Bring the surface of the bed an inch or two above the ground level to allow for sinking.

New plants are pruned at the nursery as much as they should be at planting time, cut off only the bruised or injured branches or roots just back of the point of injury. When ready to plant keep roots in a bucket of water or wrapped in wet burlap or moss until set in the hole so that they will not dry out at any time after they are unpacked. Set the plants with the swollen union where the graft joins the rootstock an inch under the soil. Spread the roots well so that none overlap, set firmly, packing with the foot, water well, then draw loose soil around the plants. Select a sunny location free of tree roots. Roses are heavy feeders and in order to keep up continuous blooming must keep supplied with food. They must have nitrogen for good foliage and growth of plant; phosphorus for bloom and color; potash for stem and branches.

Bonemeal and wood ashes are good for roses. Any complete garden fertilizer such as 7-5-5 or 5-10-5, a little at the time given about once a month during the growing season or after each blooming season.

Some rose growers advise fall planting. Some advise spring planting. Suppose we play safe and plant some roses in the fall and some in the spring.

## The Common Cold

S. V. LEWIS, M. D.

Your health department is vitally interested in the correction of physical defects, the prevention of diseases, prevention of accidents, which will in turn prolong life, and by doing so make it a more pleasant life. In promoting better health we will contribute greatly to a more sound economy for the individual family.

In discussing public health problems I believe it is well to talk about our current problems as well as those that we may know are not far in the future. For today, I have chosen a condition that is ever with us, and, until we have made further progress in the prevention of diseases, it will continue to be a nuisance. The disease to which I refer is the common cold, or, a bad thing you like it any better by that name. The common cold is highly contagious, and as you know, it is spread from one to another by excretions from the nose and mouth.

In not cover the nose and mouth with a handkerchief before coughing, sneezing or spitting. If we remember that the lungs and bronchial tree are only internal organs that are directly and constantly in communication with the outside air, we can readily understand how easy it must be for disease producing germs to enter the throat and lungs. More people probably suffer from

colds than from any other ailment. There is no information available that will give a hint as to the prevalence of the common cold, principally because the mortality rate is of no significance, and too, information would be extremely difficult to obtain. Ordinarily we do not place much importance on a cold or the disability it causes, but if the sum total of suffering, inconvenience, complications and economic loss resulting from colds could be determined, it would promote the common cold from the trivial into the rank of serious diseases.

Colds are prevalent most everywhere and all people are susceptible. There are a few isolated places where the people do not have colds unless carried to them by strangers or others who come to their territory. Those places are The Virgin Islands, Spitzbergen and the Eskimos on the Greenland Coast, Arctic explorers do not have colds until they return to civilization. This fact denotes the absence of common carriers of colds in those regions. The common cold is caused by what is known to medical authority as a virus. This virus may cause a burning of the eyes, nose and throat, with an associated watery discharge, soon followed by the invasion of various other parts of the body. It produces copious amounts of yellow germs to enter the throat and lungs, and greenish yellow discharges from the nose, and throat by

coughing or sneezing.

The most dangerous period for spreading colds is the first three days of a cold, dated from the first symptoms you may have. The immediate forerunner of pneumonia, tuberculosis and many other respiratory diseases in a great number of cases, is a severe or prolonged cold.

The ability of the pneumonia and tuberculosis germs to establish themselves depends a great deal upon the strength of the defense forces of the body invaded. Some of the principal ways in which the body's defense forces may be weakened are: chilling of the body following exposure to cold and wet, or sudden chilling when over heated; continued exhaustion from any cause; other infections, particularly colds, influenza, bronchitis, childhood diseases such as whooping cough, measles, scarlet fever and quite a number of other diseases; accidental injuries; acute or chronic alcoholism; insufficient sleep and relaxation, and, foods that are inadequate in quality and quantity.

In germ carried diseases, we must remember that a big dose of fresh germs is much harder for the body to overcome than a few stray, half dead germs we often breathe in or pick up here or there as we all must do from time to time. Therefore the danger of association with people having fresh colds of from one to three days duration. When coughing, sneezing or talking forcibly without first covering the nose and mouth with a handkerchief it is possible for a person with a fresh cold to spray the air with infectious droplets for a distance of 5 or 6 feet, thereby infecting other persons. A similar large dose of the germs may be received by kissing an infected person; by using a handkerchief, towel, a glass, cup, or other eating utensils, or some other article freshly soiled with discharge from the nose or mouth of a person with a cold; or by handling such articles, then carrying the germs to the mouth on unwashed hands, either directly or indirectly while eating.

It is a matter of observation that some people practically never have a cold, while others have a distressing number of colds, especially from Autumn till Spring, the reason being, some people have a higher degree of immunity, while others do not, signifying that one attack does not protect against subsequent colds. Other predisposing causes of colds not before mentioned are, the breathing of vitiated air, dust, smoke, gasses and exposure to drafts and sudden temperature changes.

## Report of Condition of

### MARION INDUSTRIAL BANK

of Marion, in the State of North Carolina, at the close of business on Nov. 1, 1949.

#### ASSETS

Cash, balances with other banks, including reserve balances, and cash items in process of collection	\$11,086.47
United States Government obligations, direct and guaranteed	7,634.00
Loans and Discounts	323,291.30
Furniture and Fixtures	2,167.09
Other assets	308.67

TOTAL ASSETS \$344,487.53

#### LIABILITIES

Time deposits of individuals, partnerships, and corporations	241,998.59
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TOTAL DEPOSITS \$241,998.59

Other liabilities 19,369.58

TOTAL LIABILITIES (not including subordinated obligations shown below) \$261,368.17

#### CAPITAL ACCOUNTS

Capital	25,000.00
Surplus	25,000.00
Undivided Profits	31,919.36
Reserves (and retirement account for preferred capital)	1,200.00

TOTAL CAPITAL \$83,119.36

TOTAL LIABILITIES AND CAPITAL ACCOUNTS \$344,487.53

This bank's capital consists of common stock with total par value of \$25,000.00.

I, Doris Hill, Cashier, of the above-named bank, do solemnly swear that the above statement is true, and that it fully and correctly represents the true state of several matters herein contained and set forth, to the best of my knowledge and belief.

DORIS HILL, Cashier

Correct.—Attest:  
W. R. CHAMBERS,  
J. F. SNIPES  
C. A. WORKMAN  
Directors

STATE OF NORTH CAROLINA

County of McDowell, ss.

Sworn to and subscribed before me this 14th day of Nov. 1949, and I hereby certify that I am not an officer or director of this bank.

W. F. GRANT,  
(Seal) Notary Public.