CENSUS OF IRELAND, 1901.

(Two Examples of the mode of filling up this Table are given on the other side.)

FORM A.

(Signature of Head of Family).

| | TURN of the MEMBERS of this NAME and SURNAME. No Persona AMERICA OF the Michigan Construction of the | | RELATION to Head of Family. | State here the particular Religion, or Religious Denomination. | PRINCIPLE | | | | I would in this E | louse on th | e night of SUND | AY, the 31st of I | TARCH, 1901. |
|------|---|---------------------|--------------------------------|---|---|------------------------------------|---|---|--|--|--|--|---|
| | No Persons ABSENT on the night of Sunday, March Slet, to be entered here: EXCEPT those (not enumerated elsewhere) who may be out at Work or TRAVELLING, &c., during that Night, and who BETUN HOME ON MONDAY, APRIL 1st. Subject to the above instruction, the Name of the Head of the Family should be written first; then the names of his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servants, &c. Christian Name. Surname. | |) | | EDUCATION. | AGE. | | SEX. | RANK, PROFESSION, OR OCCUPATION. | MARRIAGE. | WHERE BORN. | IRISH LANGUAGE. | |
| Numb | | | | | State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read." | Years on last Birth- day. | Months for Infants under one Year. | Write "M" for Males and "F" for Females | State the Particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attending a School, or receiving regular instruction at home, should be returned as Scholars. Before filling this column you are requested to read the instructions on the other side.] | Whether "Married," "Widow", "Widow", or "Not Married." | If in Ireland, state in what County or City; if else- where, state the name of the Country. | Write the word "IRISH" in this column opposite the | If Deaf and Dumb Dumb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective |
| 1 | Robert- | is aly | Head of | church of Irelan | 1 | 40 | 1 | M | Stone Enory Many | | | entry should be made in this column. | Write the respective infirmities opposite a name of the afflicted person. |
| 2 | Mary Ann | Dalys | Wife | dito | h 1 1. + 11/1 | | | 016 | Harm Labourer | Marriedo | bo. bavan | | |
| 3 | Thomas John | Daly | Son | dito | 1 | 34 | | * | House Nuchet | Married | Co. Monaghan | | |
| 4 | Marth Ann | of also | Daughter | 1.4 | bannt Read | 0 | | M | Not Employed | ./ | bon bavan | | |
| 5 | | 0 | - June | due | Cannot tofte ad | 2 | | 4 | Not & mployed | Not Mark | 160. bavan | | |
| 3 | | | | | | | | | | N. S. | | | |
| | | | | | | | | | | | | | |
| - | 38 | | | | | | | - | | | | | W M |
| - | 7 | | | | | | + | + | | , | | | |
| - | 2 | | | | | | - | + | | | | | |
| - | | | | | | | - | + | | | | | |
| - | | | | | | | | + | | | | | |
| _ | | | | | | - | | + | | | | | |
| | | | | | | | | - | | | | | |
| | | | | | | - | - | - | | | | | |
| | I hereby | certify as required | by the Ast C | 3 Vic., cap. 6, s. 6 (1), t | | | | | | | | | |

(Signature of Enumerator.)

ohn Morris ConsX

Robert Daly