## CENSUS OF IRELAND, 1901.

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

## FORM A.

No. on Form B. 13

(Signature of Head of Family).

|         | NAME and SURNAME.  | State whether<br>"Head of Family,"<br>or "Wife," "Son." |   |  | VANTS, &c., who slept or abode in the |         |                                 |  | TOTAL OIL TH                           | e night of SUND  | AY, the 31st of M  | IARCH, 1901   |
|---------|--|---|---|--|---------------------------------------|---------|---------------------------------|--|--|--|--|---|
| Number. | be entered here: EXCEPT those (not enumerated clauschers) who may be out at Work or Travelling, de., during that Night, and who return House on Monday, Armil 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, do.  Christian Name |   | State here the particular Religion,<br>or Religious Denomination. | EDUCATION.   | AGE.                                  |         | SEX.                            | RANK, PROFESSION, OR OCCUPATION.   | MARRIAGE.                              | WHERE BORN.  | IRISH LANGUAGE.  | If Deaf and Dumb  |
|         |  |   |   | State here whether he or she<br>can "Read and Write," can<br>"Read" only,<br>or "Cannot Read." | Years<br>on last<br>Birth-<br>day.    | 1 for I | Write "M" for Males and "F" for | 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.          | Whether "Married." "Widower," "Widow," | If in Ireland, state in what<br>County or City, if else-<br>where, state the name of | Write the word "Inish" in<br>this column opposite the<br>name of each person who<br>speaks Inish only, and the                 | Blind;<br>Blind;<br>Imbecile or Idiot;<br>or Lunatic.                   |
| ,       | Da 111.  | 7   | they belong.]   |  |                                       |         | - Culaies                       | Children or young persons attending a School, or receiving regular instruction at home, should be returned as Schoolar.  Before filling this column you are requested to read the instructions on the other side.] | or "Not Married."                      | the Country.   | opposite the names of those<br>who can speak both langu-<br>ages. In other cases no<br>entry should be made in<br>this column. | Write the respective infirmities opposite name of the afflicted person. |
| •       | More Ring.   | wad of %  | my Boman batet de   | Pan Headaw   | 45                                    | 5       | In                              | Farmer   | Sharicy                                | Po Carrin  | English  |   |
| 3       | Thank Alic Finas   | Mile  | fromon Cattle   | Con lead Mate  | 4                                     | 4       | 7                               | wife   | Gorriel                                | Co Carran  | 01   |   |
| 4       | July rang  | langhto   | Moment att  | del Can Arteador   | 14                                    | 3_      | 7                               | . /  | Got marie                              | Colavan  | Guglish  |   |
| 5       |  |   |   |  |                                       |         |                                 |  |  |  | Thyunk   |   |
| 6       |  |   |   |  |                                       | -       | _                               |  |  |  |  |   |
| 7       |  |   |   |  |                                       |         | -                               |  |  |  |  |   |
| 3       |  |   |   |  |                                       | -       | -                               |  |  |  |  |   |
| ,       |  |   |   |  | -                                     | -       | -                               |  |  |  |  |   |
| L       |  |   |   |  | -                                     | -       | -                               |  |  |  |  | 364   |
| -       |  |   |   |  |                                       | -       | +                               |  |  |  |  |   |
| -       |  |   |   |  |                                       | -       | -                               |  |  |  |  |   |
| -       |  |   |   |  |                                       | -       | +                               |  |  |  |  |   |
| -       |  |   |   |  |                                       |         | -                               |  |  |  |  |   |
| L       |  |   |   |  |                                       |         | -                               |  |  |  |  |   |
|         | I hereby certify, as required begoing Return is correct, according to  | y the Act 63  | 3 Vic., cap. 6, s. 6 (1), th                                      | at the   | -                                     |         |                                 | I believe the foregoing  |  |  | 100000000000000000000000000000000000000  |   |

Michael Ryan Con (Signature of Enumerator.)

Patrick x King

Witness Michael