FORM A. TURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House on the								No. on Form B. 5		
NAME and SURNAME.	RELATION to	RELIGIOUS PROFESSION.	EDUCATION.	AGE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dur Dumb only; Blind:
No Persona almany on the night of Sunday, March, entered here: axcent those and emanarated clar whe may be est at Woost or TharRLLNG, dc., d that Night, and who arrups Hours of Moon Arat. 185. Subject to the above instruction, the Name of the H the Family should be written first; then the nan his Wife, Children, and other Relatives; then the Visitors, Boarders, Servants, &c.	tring State whether "Head of Family," "e" Wifa," " Son."	State here the particular Beligion, or Religious Denomination, to which each person belongs. (Members of Protestant Denomina- tions are requested not to describe themselves by the vague term "Protestant," but to enter the name of the Particular Church, Denomination, or Body, to which	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years on last Birth- day. Months Infants under one Year.	"M" for Males and	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." "Widower." "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 "Imm" in this column opposite the name of each person who speaks Inust outy, and the words "Inust & Exotust" opposite the names of those who can speak both iangu- ages. In other cases no entry should be made in this column.	Mine i Imbecile or Idi or Lunatic Write the respect infirmities opposit mame of the afflicted period
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