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. 6

RETURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House on the night of SUNDAY, the 31st of MARCH, 1901.

|       | NAME and SURNAME.  No Persons ansert on the night of Sunday, March 25st to   | RELATION to<br>Head of Family.  | RELIGIOUS PROFESSION.  | EDUCATION.    | A                                  | GE.         | SEX.   | RANK, PROFESSION, OR OCCUPATION.   | MARRIAGE.                             | WHERE BORN.  | I IDIOU I ANGUAGO  |   |
|-------|--|---|--|---------------|------------------------------------|-------------|--|--|---------------------------------------|--|--|---|
| mber. | No Persons amsent on the night of Sunday, March Hat, to<br>be entered here: EXCEPT those (not enumerated elsewhere)<br>who may be out at Wonz or TRAVELLING, de., during<br>that Night, and who RETTEN HOME ON MONDAY,<br>APREL 1st.         | State whether "Head of Family," or "Wife," "Son." "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c. | "[Members of Protestant Denomina-<br>tions are roquested not to describe<br>themselves by the vague term<br>"Protestant," but to enter the<br>name of the Particular Church,<br>Denomination, or Body, to which<br>they belong.] |               |                                    | Months Writ | _  | State the Particular Rank, Profession, Trade, or other Employment of each person. Or Children or young persons attending a School or respectively. | Whether "Married." "Widower," "Widow" | If in Ireland, state in what<br>County or City; if elso-<br>where, state the name of<br>the Country. | Write the word "IMBH" in this column opposite the name of each person who speaks Inuse only, and the words 'I muse & English 'Opposite the names of those who can speak both languages. In other cases no entry should be made in this column. | If Deaf and Dumb Dumb only; Blind; Imbecile or Idiot; or Lunatic.  Write the respective infirmities opposite th name of the afflicted person. |
| n N   | Subject to the above instruction, the Name of the Head of<br>the Family should be written first; then the names of<br>his Wife, Children, and other Relatives; then those of<br>Visitors, Boarders, Servants, &c.  Christian Name.  Surname. |   |  |               | Years<br>on last<br>Birth-<br>day. |             | "M" for<br>Males<br>and<br>"F" for<br>Females. |  |                                       |  |  |   |
| 1     | Thomas Casuly  | Head  | Galholig Chur  | Read          | 7/-                                |             | Re.  | Farmer   | Vidouses                              | loo Grown  | Enchole  | ~   |
| 2     | Thomas basedy  | Servent   | - 00   | Read or writi | 60                                 | `-          | M  | 4.   | ust married                           | 1 Co Carrer  | Cufled   | _   |
| 3     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
| 4     |  |   |  |               |                                    |             | •  |  |                                       |  |  |   |
| 5     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
| 6     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
|       |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
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| ,     |  |   | 11   |               |                                    |             |  |  |                                       |  |  |   |
| 1     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
| 2     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
| -     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
| -     |  |   |  |               |                                    |             |  |  |                                       |  |  |   |
| 5     |  |   |  |               |                                    |             | 949  |  | 115                                   |  |  |   |

I hereby certify, as required by the Act 63 Vic., cap. 6, s. 6 (1), that the foregoing Return is correct, according to the best of my knowledge and belief.

I believe the foregoing to be a true Return.