FORM A. No. on Form B. // No. on Form B. //												
10 1	can of Falliny.		EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Damb	
1000	State whether lead of Fannity, "Wife," "Son, Daughter," or ther relative; "Visitor," "Boarder," Servant," de.	State here the particular Religion, or Religious Denomination, to which each person belongs. Members of Protestant Denomina- tions are requested not to describe themselves by the varue term "Trotestant," but to enter the rame of the Particular Church, Denomination, or Body, to which they belong.]	can "Read and Write," can "Read" only, or "Cannot Read."	Years on last Burth- day.	one Year.	"M" find Males and "F" for Females	home, should be returned as Scholars. Before filling this column you are requested to read the Instructions on the other side.j	"Married." "Widower."	If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "Insa" in this column opposite the	Dumb only ; Blind ; Imbecile or Idiot ; or Lunatic. Write the respective infimities opposite the name of the	
90	Forme	Reatfolie	Cannot Read	30		m	Farmer	hot Marrie	Clavon		sillicted person.	
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RETURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House on the night of SUNDA											No. on Form B	o. on Form B. //	
	Persons ADEXT on the night of Sunday, March 31st, thered here: EXCEPT these (not counterated elsewhere is may be out of WORKEY THAT STALLING, de, during that Night, and who RETENS HOME ON MONDAY.	to t)		EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN. IRISH LANGUAGE			
10	ret to the above instruction, the Name of the Hend Pamily should be written first: then the names of Wife, Children, and other Reintives; then the sames of Visitors, Bouriers, Servants, dr. Breast Surame. Surname.	"Blead of Pannity," rr "Wife," "Son, "Daughter," or other relative; "Visitor," "Boarder," "Servant," de.	State here the particular Religion, 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 rame of the Particular Church, Denomination, or Body, to which they belong.]	State here whether he or she can "Read and Write," can "head" only, or "Cannot Read."	Years on last Birth- day.	Months for Infants under one Year.	"M" In Miales and "F" for Females	State the Particular Rank, Profession, Trade, or other Europeyment of each person, Children or young persons attending a School, or receiving regular instruction at home, should be returned as Scholarz. Before filling this column you are requested to read the instructions on the other side.]	Whether "Married."	If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "Insen" in this column opposite the name of each person who speaks Insen orly, and the words "Insen & ENGLESS" opposite the names of those who can speak both langu- ages. In other cases no entry should be made in	Write the resp infirmities oppo	
7	helep perman	of Formes	Kat folie	Cannot Rood	30		m	Farmer	hot Marrie	Clavon	this column.	afflicted per	
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