RE	TURN of the	FORM A. No. on Form B. 7 No. on Form B. 7 NRN 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 MAR											
1	NAME and SURNAME.		RELATION to		EDUCATION.	1	GE.	sex. RANK, PROFESSION, OR		MARRIAGE.	WHERE BORN,	IRISH LANGUAGE.	If Deaf and Dumb
nber.	who may be out at WOB that Night, and who in Al	hose (not enumerated elsewhere) is or TRAVELLING, dc., during RETURN HOLE ON MONDAY, pull 1st. uction, the Name of the Head of ritten first ; then the names of other Relatives ; then those of rders, Servants, &c.	31st, to	State here the particular Religion, or Religious Denomination.	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	Chataithe Destinutes Dank Thefanin The A		If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "INISH" in this column opposite the name of each person who speaks IRISH only, and the words "INISH & ENGLISH" opposite the names of thosy who can speak both langu ages. In other cases no entry should be made in this column.	Dumb only; Blind; Blind; Imbecile or Idiot or Lunatic. Write the respectiv infirmities opposite t
1	Christian Name. Neter	Surname. Lynch	"Servant," to.	A IA A A	Cannot read or write	20		h	to read the Instructions on the other side.	Married	Pon Cavan	entry should be made in this column.	Write the respective infirmities opposite ty name of the afflicted person.
2	Kate	Lynch	Wife	Catholick	ban read only	48		P	If Mite	married	County Pavan		
3	Maggie	Brady	Servant	Catholick	ban read ind write	18		P	Gemale Servant	Pot mune	Con Cavan		-
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5				63 Vic., cap. 6, s. 6 (1),									