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OF IRELAND, 1901. CENSUS

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

FORM A.

No. on Form B. 10

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.		RELATION to Head of Family	RELIGIOUS PROFESSION.	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only;
umper.	No Persons ABSENT on the night of Sunday, March 21 be entered here: EXCEPT those (not enumerated elsew) who may be out at Wonx or TRAVELING, do., dur that Night, and who RETURN HOME ON MONDAY APRIL 1st. Subject to the above instruction, the Name of the Hea	state whether "Head of Family, " "Wife." "Son.	State here the particular Religion, or Religious Denomination, to which each person belongs. [Members of Protestant Denominations 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 they belong.]	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years on last Birth- day.	under		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.		If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "LRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & ENGLISH" opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Blind; Imbecile or Idiot; or Lunatic.
Z	Subject to the above eastruction, the Name of the Hea the Family should be written first: then the name his Wife, Children, and other Relatives; then thos Visitors, Boarders, Servants, &c. Christian Name. Surname.	of other relative; "Visitor," "Boarder," "Servant," &c.						Before filling this column you are requested to read the instructions on the other side.)				Write the respective infirmities opposite the name of the afflicted person.
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(Signature of Enumerator.)

I hereby certify, a	s required by	the Act	63 Vic.	, cap. 6, s	. 6 (1), that t	he
Datum is sorrest				and the same of		

I believe the foregoing to be a true Return. Mothew Tinley

(Signature of Head of Family).