total. 1 Castle mber, 1900.

ENSUS 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.

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 ABSENT on the night of Sunday, March 31st, t | 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; |
|---------|--|---|--|---|--------------------|---|---|--|--|--|--|---------------------------------|
| Number. | No Persons absent on the night of Sunday, March 31st, the entered here: Except those (not enumerated elsewhere who may be out at Work or Travelline, de., during that Night, and who return Home on Monday, April 1st. Subject to the above instruction, the Name of the Head of the Family should be written first; then the names of his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servante, do. | State whether "Head of Family," or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c. | 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 h | Months for infants under one Year. | Write "M" for Males and "F" for Females | 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 Schokars. 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 "IRISH" 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 languages. In other cases no entry should be made in this column. | |
| | Christian Name. Surname. | | they belong.] | | | | 47 | | 112 | 0 1 - | this column. | afflicted person. |
| 1 | Mary anne They day | Frat offerit | Church chirely | Read and Write | 7/ | | it | Farmer | Midou | To bavan | - | |
| 2 | Robert Shoridan | Jon | Church of Ireland | Read and Mite | 35 | | cll | Farmer's son | Not married | bo bavan | | |
| 3 | Alexander Theriday | Son | Church of Ireland | Reat and Thile | 25 | | cll | Farmer's Son | elet married | Co Cavan | | |
| 4 | Mayrie Jane Million | Frand Daughter | 6 hurch of Ireland | Read and Write | 18 | | 7 | Farmers Grandaus | Not married | Cotermanagh | | |
| 5 | a | 1 | | | | | | 0 | | | | |
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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.

Robert Inc Tuelagh Con (Signature of Enumerator.)

I believe the foregoing to be a true Return.

Maryanne Theridan (Signature of Head of Family).