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. 3

ETURN 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.

									repr or about in this h	ouse on th	e night of bomb	al, the sist of h	IAKCH, 1901.
1		NAME and SURNAME. No Persons absent on the night of Sunday, March 31st, to be entered here: except those (not enumerated elsewhere) who may be out at Work or Travelling, &c., during	RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE.	SE	х.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb:
Number	Jager	who may be out at Work or Travelling, dc., during that Night, and who return Home on Mondar, 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, Servants, &c.	State whether "Head of Family,"	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 name of the Particular Church, Denomination, or Body, to which	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years for last lnfa	nths Wri or "M" ants Mal der anc	d h	ate the Particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attending a School, or receiving regular instruction at nome, should be returned as Scholars.	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	Dumb only; Blind; Imbecile or Idiot; or Lunatic.
1	-	Christian Name. Sdrname.	Med	they belong.]					s. Before filling this column you are requested to read the Instructions on the other side.]			opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Write the respective infirmities opposite the name of the afflicted person.
1	1	Mathew How Webl	John's	I Church	Read Wit.	58	1/1	1	web-quetterner	Menin	(Co Cavan	4	
2	1	Martin Jam Will (Tought	Thurs	- Ricar Win	35	X		kholar tarmet	Lugale	(o Cavar		
3	K	well Hebb	fon	I Church	Bread Wiel	-10	1		Cholen	Luigh	(o Cavan		
4	1	romer Freduck Webl	ton	I Church	Bred Mil	-8	1	4	Cholen	Lingle	Co Cavas	. 1	
5	12	alkleen levice Webl	augh	- Thurch	Count red or un	46	A		Scholler	Lingla	10 Caves		"
6	1	www. Telan Well-	Jough	7 Church	Count water	tic.	F	1	Scholan	Lingle	6 (evas		
3	1	della Leatre	source.	I Church	red Write	29	A	_	Teacher	Lingle	Middles	7	
8	Ha	warch Kroony	Lewan	B. Church	hed wit	26	A		German Somanda	Lingla	With mick	-	4
9	C	Elen Woodla	Leven	W Church	wad will	24	A	0	Lewant Dones	lingh	Co Cavas		
10	-												
11	-							-					
12	-							-					
13	-				•			-	•				
14	-												
15	la ne	I hereby certify, as required		A CONTRACTOR OF THE SECOND									

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.

Satrick Sunn Gratable (Signature of Inumerator.)

I believe the foregoing to be a true Return.

(Signe

(Signature of Head of Family).