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OF IRELAND, 1901. SUS

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

FORM A.

No. on Form B. /2

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.

Number.	NAME and SURNAME. No Persons ABSENT on the night of Sunday, March 31st, to be entered here: EXCEPT those (not enumerated elsewhere	Head of Family. It is then the names of the Boarders, Servants, &c. Surname. Head of Family. State whether "Head of Family." "Daughter." or "Wife." "Son." "Daughter." or "Other relative; "Visitor." "Boarders, Servants, &c. "Boarders, Servants, &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.]		AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb;
	APRIL 186.				Years on last Birth- day.	Infants under one	Write "M" for Males and "F" for Females.	School, or receiving regular instruction at home, should be returned as Scholars.	Whether "Married." "Widower." "Widow," or "Not Married."	If in Ireland, state in what County or City; if clas- where, state the name of the Country.	Write the word "IRBH" in this column opposite the name of each person who speaks IRBH only, and the words "IRBH & ENGLEH" opposite the names of those who can speak both languages. In other cases no entry should be made in this column.	Dumb only; Blind; Imbecile or Idlet; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
	Christian Name. Surname.											
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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.

Michael Bourkelow (Signature of Enumerator.)

I believe the foregoing to be a true Return.

(Signature of Head of Family).