## CENSUS OF IRELAND.

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

## FORM A.

RETURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House NAME and SURNAME. RELATION to Head of Family RELIGIOUS PROFESSION. No Persons ABSENT on the night of Sunday, March 31st, the be entered here: EXCEPT those (not enumerated elsewhere who may be out at WORK or TRAVELLING, dc., during that Night, and who BETCHEN HOME ON MONDAY, APRIL 1st. EDUCATION. RANK, PROFESSION, OR OCCUPATION. AGE. SEX. MAR State here the particular Religion, or Religions 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 they belong.] tate whet ead of Fan Wife," " Daughter, ove instruction, the Name of the Hi uld be written first; then the nam ren, and other Relatives; then the tors, Boarders, Servants, &c. Months for Infants under one Year. Write "M" fo Males and "F" fo Years on last Birth-day. State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read." ore filling this column you are required the Instructions on the other Christian Name. Surname. Head of on Catholic Brade Farmer A m 1 rances Uhurch of Rom Read & Write 40 ma H Bridget Church of Rome Read & Write 38 Orad 2 ma Harmer's Wile Annie Me. Brad Y 3 Church of Rome Head & Way Jaughto 18 mer's Daughte hot lames Brog me of Rom Read & torit Son Church 15 Francis Son hoth Pora Katie hurch Rome Read & Write M 5 exa 13 holar 7 pt John Francis Brady m Church of Rome Reade Write Non Scholar. 6 9 hoth Brady Odward the son Read 5 Church of Rome cle nolar. hotm 8 9 10 11 12 13 . 14 15 I hereby certify, as required by the Act 63 Vic., cap. 6, s. 6 (1), that the I believe the foregoing to be foregoing Return is correct, according to the best of my knowledge and belief. Charles Johnston (Signature of Enumerator.) Ura

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No. on Form B the night of SUNDAY, the 31st of MARCH, 1901.			
E.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only;
ed," Fer," W," Arried."	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 langu- ages. In other cases no entry should be made in this column.	Blind; Imbecile or Jdiot;
			Write the respective infirmities of posite the name of the afflicted person.
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-	60. Cavan		
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