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				OR	M				X	to. on Form B.	113
TURN of the MEMBER	S of this FAMILY	and their VISITORS,	BOARDERS, SERV	ANTS	, &c.,	who	slept or abode in this H	ouse on the	night of SUNDA	XY, the 31st of M	IARCH, 1901.
NAME and SURNAME	Hood of Family		EDUCATION.	ÅG	E.	SEX.	RANK, PROFESSION, OR . OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind;
Visitors, Boarders, Servants, &c.	de. during	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 they belong.]	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years	Months	Write	State the Particular Rank, Profession, Trade, or other Employment of each person. for Children or young persons attending a school, or receiving regular instruction at home, should be returned as Scholars. Jefore 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 speaks least only, and the words "IRISH & ENGLESH" opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	mbecile or Idiot; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
	"Boarder."			Years on last Birth- day.	Months for Infants under one Year.	" F for					
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