opau uumoo aut ENSUS 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 or NAME and SURNAME. RELATION to Head of Family. RELIGIOUS PROFESSION. No Persons ABSENT on the night of Sunday, March 31st, to be ent red here : EXCEPT those (not enumerated elsewhere) who may be out at WORK or TRAVELLING, dc., during that Night, and who RETURN HOME ON MONDAY, APRIL 1st. EDUCATION. AGE. RANK, PROFESSION, OR OCCUPATION. SEX. MARRIA 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 whether Head of Family r "Wife," "Son "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c. ate the Particular Rank, Profession r other Employment of each hildren or young persons attention Months for Infants under one Year. Bubject to the above instruction, the Narne 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, Servanis, &c. on, Trad State here whether he or she can "Read and Write," can "Read " only, or " Cannot Read." Years on last Birth-day. "M" fo Males and "F" fo "Marrie Widow "Widow Not Ma Before filling this column you are req to read the Instructions on the other Christian Name. Surname. Heado Patrick M. Cogan R. 1 Cannot Read were 80 Ъ Farmer m Marr Web R. Margret 6 logan 2 Cannot Read winter 7: ¥ more R. Thomas 3 m. Cannot Read wit 30 1009 an Farmer's Son son hofma 4 5 7 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 foregoing Return is correct, according to the best of my knowledge and belief. I believe the foregoing to be a t

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Proce Dissinger Car

John S. Yaylor Const (Signature of Enumerator.)

Patrick I

No. on Form B. 5		
WHERE BORN,		
HIERE BURN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind; imbecile or Idlot;
If in Ireland, state in what County or City ; if else where, state the name of the Country.	this column opposite the name of each person who speaks IntsH only, and the words "IntsH & ENGLISH" opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	or Lunatic.
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