R	RETURN 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 M. No. on Form B. No. on Form B. No. on Form B. No. on Form B. No. on Form B.										7		
iber.	who may be out at WORK or TRAVELLING, dc., during that Night, and who RETURN HOME ON MONDAY, APRIL 181.		(97	RELIGIOUS PROFESSION.	EDUCATION.	AGE. SEX		SEX.	RANK, PROFESSION OF				
				State here the particular Religion, or Religious Denomination, to which each person belongs. [Members of Projectant Denomination]					OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dum Dumb only; Blind;
	his Wife, Children, an Visitors, Bo Christian Name.	truction, the Name of the Head o written first ; then the names of d other Relatives ; then those of parders, Servants, &c. Surgame.	or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.	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 on last Birth- day.	Infants	Write "M" for Males and "F" for	home, 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.	this column annext	mbecile or Idio or Lunatic.
1	Kate	Keogan	Head of					Females	Before filling this column you are requested to read the Instructions on the other side.]	or "Not Married."	the Country.	opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Write the respecti infirmities opposite name of the afflicted person.
2		jun	Family	Roman Catholic	Read	60	-	y	Housekeeper	Widow	leavan	-	andred person.
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