CENSUS OF IRELAND, 1901.

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

FORM A.

No. on Form B. /

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 MARCH, 1901.

	NAME and SURNAME. No Persons ABSENT on the night of Sunday, March 31st, to be entered here: Except those (not enumerated elsewhere) who may be out at WORE or TRAVELLING, &c., during that Night, and who RETURN HOME ON MONDAY,	RELATION to Head of Family.		EDUCATION.	A	BE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dum
Number.	that Night, and who EFTERN HOME ON MONDAY, APRIL 1st. Subject to the above instruction, the Name of the Head of the Family should be written first; then the names of his Wife, Children, and other Relative; then those of Visitors, Boarders, Servants, &c.	"Head of Family,"	[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.]		Years on last Birth- day.	Months for Infants under one Year.	Write "M" for Males and "F" for Females.	State the Particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attending a School, or receiving regular instruction at home, should be returned as Scholars. Before 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 name of each person who speaks IRISH only, and the words "IRISH & ENGLISH" opposite the names of those who can speak both languages. In other cases no entry should be made in this column.	Dumb only;
	Visitors, Boarders, Servants, &c. Christian Name. Surname.											Write the respective infirmities opposite in name of the afflicted person.
1	Mich! Wright	Head of Fam	4 R. Cotholic	Read & Write	54		16	Farmer Surveyor	Married	lo bavan		
2	Anne Wright	Wife	00	Read	50		of		Married	.do	- /	-
3	gat Wright	Son	b o	Read While	22		In	Farmers Son	hot mans	40	-	
4	John Mright	Son	80	Read + Write	18	-	m	Farmers Son	hot mard	to		
5	Wright	Daughte		Read + Write	16		of	Farmers Daughter	hot mand	to	,	
6	12 4 Might	Son	.00	Read & Write	14		In.	Farmers Son	Rot mars	8.0	-	1 *
8	Bernard Mught	Son	20	Read Write	12		m	Farmers Son	not mand	do	- , ,	
9												
0												
1												
2												
3												
5							10					A L CO

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 true Return.

(Signature of Head of Family).