CENSUS OF IRELAND, 1901.

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

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

| Number. | APRIL 1st. APRIL 1st. Subject to the above instruction, the Name of the Head of the Faraily should be written first; then the names of his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servants, &c. Christian Name. Surname. | | State whether "Head of Family," or "Wife," Son, "Daughter," or other relative; "Visitox," "Boarder," "Servant," &c. | State here the particular Religion, or Religious Denomination, to which each person belongs. [Members of Protestant Denominations are requested not to describe themselves by the vague term "Frotestant," but to enter the name of the Particular Church, Denomination, or Body, to which they belong.] | EDUCATION. | AGE. | | BEX. | slept or abode in this I | | TENT OF BUND | AY, the 31st of I | MARCH, 1901 |
|---------|--|------------------------|---|---|-------------|----------------|----------------------------------|---|---|--|--|---|--|
| | | | | | | | 1 | write "M" for ints Males ier and "F" for ir. Females. | State the Particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attempts. | Whether "Married." "Widower." "Widow." or "Not Married." | WHERE BORN. If in Ireland, state in what County or City; if elsewhere, 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 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. | If Deaf and Dumb only; Blind; imbecile or Idiot or Lunatic. |
| | | | | | | Birth- day. | Infants under one Year. | | | | | | |
| 2 | John dans | Timmins | 7 amily | Catholic | ReadeMite | 35 | | | | | | ages. In other cases no entry should be made in this column. | Write the respective infirmities opposite infirmities of the name of the afflicted person. |
| - | The state of the s | Jemmins | Sister | Catholic | head a Wito | 98 | | 1000 | 1. | nothane | Cavam | | |
| 4 | | | | | - Joan | 70 | | | Farmer. Housekeeper. | hot marie | Cavan | | |
| 5 | | | | | | | | | | | | | |
| 6 | | | | | | | - | | | | | | |
| 7 | | | | | | _ | - | _ | | | | | |
| 1 | | | | • | | - | + | - | | | | | |
| - | | | | • | | | - | + | | | | | |
| - | | | | | | | 1 | - | | | | | |
| - | | | | | | | | + | | | | | |
| | | | - | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | - | | | | | |
| | I hereby ce | ertify, as required by | the Act 63 | Vic., cap. 6, s. 6 (1), that my knowledge and belie | | | | | | | | | |

John. S. Faylor Const (Signature of Enumerator.)