CENSUS OF IRELAND, 1901.

(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 on the night of **SUNDAY**, the 31st of **MARCH**, 1901.

No. on Form B. 24

Number.	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 WORK or TRAVELLING, &c., during that Night, and who RETURN 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 Relatives; then those of Visitors, Boarders, Servants, &c.		RELATION to Head of Family. State whether "Head of Family," or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.	RELIGIOUS PROFESSION. 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 "Protestant," but to enter the name of the Particular Church, Denomination, or Body, to which they belong.]	EDUCATION. State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	AGE.		SEX. Write "M" for Males and "F" for Females	RANK, PROFESSION, OR OCCUPATION. 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.]	MARRIAGE. 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.	IRISH LANGUAGE. 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.	If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
	Christian Name.	Surname.				Years on last Birthday.	Months for Infants under one Year.							
1	Thomas	Witt	Head of Family	R. C.	Read & Write	40		M.	Farmer	Married	County Cavan	English		
2	Fanny	Witt	Wife	R. C.	Read & Write	30		F.	Farmers Wife	Married	County Cavan	English		"
3	Bridget	Coyle	Sister	R. C.	Read & Write	62		F.	Farmers daughter	Widow	County Cavan	English		"
4	James	Witt	Son	R. C.	Read & Write	12		M.	Farmers Son	Not married	County Cavan	English		"
5	John J	Witt	Son	R. C.	Cannot Read	6		M.	Farmers Son	Not married	County Cavan	English		"
6	Thomass	Witt	Son	R. C.	Cannot Read	3		M.	Farmers Son	Not married	County Cavan	English		"
7	Joseph	Witt	Son	R. C.	Cannot Read		4	M.	Farmers Son	Not married	County Cavan	English		"
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.

John S. Taylor Const *(Signature of Enumerator.)*

I believe the foregoing to be a true Return.

Thomas Witt *(Signature of Head of Family).*