CENSUS OF IRELAND, 1901.

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

FORM A.

	who may be out at Work or Teavelling, de., during that Night, and who return Home on Monday, APAIL lst. 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. Christian Name. Surname.		RELATION to Head of Family.	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.]		State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."		AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	HISTORY OF THE PARTY OF THE PAR		MARCH, 1901.
aper			State whether "Head of Family," or "Wife," "Son," of "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.					day.	Months for Infants	Write "M" for Males	State the Particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attending a	whether "Married."	"If in Ireland, state in what County or City; if elsewhere, state the name of the Country.	words "IRISH & ENGLISH"	If Deaf and Dumb Dumb only; Blind; mbecile or Idiot; or Lunatic. Write the respective infarmities opposite the name of the afflicted person.
									under one Year.	and "F" for Females.	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.				
2	Edward	Brady	Son Son	Roman	batholic	Read	twrite	35		7	Farmer	charmed	6 westmeath	this column.	afflicted person.
3	for 1 Joseps	po	Son	Do	Do Do	00	DO	9		M	THE RESIDENCE OF THE PARTY OF T		Cavan	# * ·	7
4	philip	20	Son	Do	DO	00	DO	7		al	po	boso	po		
5	slugh.	po	Son	po	Do	Read	only.	6		au	20	bo po	20	<u>,_</u>	
6	4														
8	6										9				
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0 -															_/
2									-	_					
3					•										
1															

(Signature of Enumerator.)

ereby 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).