## CENSUS OF IRELAND, 1901.

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

## FORM A.

No. on Form B. 5

FURN 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.

| 200     |   |             |  |   |  |                         |                          |  |   |            |  |  |   |
|---------|---|-------------|--|---|--|-------------------------|--------------------------|--|---|------------|--|--|---|
| Т       | NAME and SURNAME.  No Persons absent on the night of Sunday, March Siet, to be entered here: Except those (not enumerated elsewhere) who may be out at Work or Travelling, de., during that Night, and who return Hore on Mondat, 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, dc.  Christian Name.  Surname. |             | RELATION to<br>Head of Family.   | RELIGIOUS PROFESSION.   | EDUCATION.   | AG                      | E.                       | SEX.                                     | RANK, PROFESSION, OR OCCUPATION.            | MARRIAGE.  | WHERE BORN.  | IRISH LANGUAGE.  | If Deaf and Dumb;<br>Dumb only;   |
| Number. |   |             | State whether "Head of Family," or "Wife," "Son," "Daughter," or other relative; "Visitive," "Boarder," "Servant," de. | 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<br>can "Read and Write," can<br>"Read" only,<br>or "Cannot Read." | Years for on last Infan | Months<br>for<br>Infants | write "M" for Males and "F" for Females. | School, or receiving regular instruction at |            | If in Ireland, state in what<br>County or City; if else-<br>where, state the name of<br>the Country. | Write the word "IRISE" 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. | Blind;  |
|         |   |             |  |   |  |                         | under<br>one<br>Year.    |  |   |            |  |  | Write the respective infirmities opposite the name of the afflicted person. |
| 1       | Cartering   | Cilcum      | Head of Yamely   | Roman Catholic  | Reas awrite  | 05                      |                          | 7  | Farmer                                      | Wisow      | les meath  |  |   |
| 2       | John  | Silsman     | lon  | Roman backolic  | Baa awrite   | 2/                      |                          | m  | farmer for                                  | Wit marris | Colavan  |  |   |
| 3       | Rose  | Fitzpatrick | nice   | Roman Catholic  | Reagwrite  | 19                      |                          | 7  | Farmers Doughter                            | not marrie | les leavon   |  |   |
| 4       | Peter   | menaghan    | Servant  | Roman Catrolic  | Read & write   | 24                      |                          | 'n                                       | Form bewant                                 | Mi marria  | les bavan  |  |   |
| 5       |   | -           |  |   |  |                         | _                        |  |   |            | 7.   |  |   |
| 6       |   |             |  |   |  |                         | _                        |  |   |            |  |  |   |
| 7       | -   |             |  |   |  |                         |                          |  |   |            |  |  |   |
| 8       |   |             |  |   |  |                         |                          |  |   |            |  |  |   |
| 9       |   |             |  |   |  |                         | _                        |  |   |            |  |  |   |
| 10      |   |             |  |   |  | _                       | -                        | _  |   |            |  |  |   |
| 11      |   |             |  |   |  |                         |                          |  |   |            |  |  |   |
| 12      |   |             |  |   |  | _                       |                          |  |   |            |  |  |   |
| 13      |   |             |  |   |  |                         | -                        |  | *   |            |  | No.  |   |
| 14      |   |             |  |   |  |                         |                          |  |   |            |  |  |   |
| 40      |   |             |  |   |  |                         |                          |  |   |            |  |  |   |

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.

rdward 360 no 1 (on (Signature of Enumerator.)

I believe the foregoing to be a true Return.

. Latherine Gilsenan ( Signature of Head of Family ).