CENSUS OF IRELAND, 1901.

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

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No. on Form B. 13

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, 19

| | NAME and Si | | RELATION to Head of Family. | RELIGIOUS PROFESSION. | EDUCATION. | 1 | GE. | SEX. | RANK, PROFESSION, OR | MARRIAGE. | | , | |
|-----|--|----------------|---|--|--|------------------------------------|-------------------------|--|---|-----------------------|---|---|---|
| | who may be not at Worse or ThatPELLYSS, St., during that Night, and who never how House on Monday. | State whether | State here the particular Religion, or Religious Denomination, | | - | | | OCCUPATION. | - | WHERE BORN, | IRISH LANGUAGE. | If Deaf and Dumb Dumb only; | |
| | Swiped to the above instruction, the Family should be written his Wile, Children, and other Visitors, Boarders, | | "Visitor," "Boarder," | Members of Protestant Denomina- tions are requisited not to describe themselves by the vague term "Protestant," but to enter the name of the Particular Church | State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read." | Years on last Birth- day. | Infants under one | and "F" for | School, or receiving regular instruction at home, should be returned as Schokers. | "Married." "Widower," | If in Ireland, state in what County or City; if else- where, state the name of | Write the word "IRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & ENGISH" opposite the names of those | Biine; imbecile or Idio or Lunatic. |
| ı | Christian Name. Surname. | "Servant," de. | Denomination, or Body, to which they belong.; | | Year | | Females | es. Before filling this column you are requested to read the Instructions on the other side.) | or "Not Married." | the Country. | who can speak both langu- ages. In other cases no entry should be made in this column. | infirmities opposite name of the afflicted person. | |
| 1 (| Bridget M | & Dormit | hadft | Roman Catholic | Read | 52 | _ | F | Form Servant | Not pravi | 60 Cavan | Iresh & Eng | ih |
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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.