## CENSUS OF IRELAND, 1901.

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

## FORM A.

No. on Form B. 3

RETURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this Ho

er.	be entered here: EXCEPT those (not enumerated elsewhere) who may be out at WORK or TRAVELLING, de., during that Night, and who RETURN HOME ON MONDAY	cau of Family.	- TROPESSION.	EDUCATION.		GE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dum
Numb	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.	"Visiter," "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 "Protestant," but to enter the name of the Particular Church, Denomination, or Body, to which they belong.]	can "Read and Write," can "lead" only, or "Cannot Read."	Years on last Birth- day.	Months for Infants under one Year.	Write "M" for Males and "F" for Females.	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.]	Whether "Married." "Widower." "Widow," or "Not Married."	If in Ireland, state in what County or City; if else- where, 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 & ENGLISH" opposite the names of those who can speak both languages. In other cases no entry should be made in this column.	Dumb only;
1	Catherine 16 Carp.	Stead	R. Catholic	Read	45	_	J.	Farmer	lindan	Co.Cavan	this column.	name of the afflicted person.
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	I hereby certify, as required by											*

Telvins Const (Signature of Enumerator.)