OF IRELAND, 1901. CENSUS

FORM A.

No. on Form B. 14

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.

E				and their vibrious,	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORE.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind; Imbecile or idiot;
1	NAME and SURNAME. No Persons ABSENT on the night of Sunday, March Sist, 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. Christian Name. Surname.		other relative; "Visitor," "Boarder," "Bervant," &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.]	b ate here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	1						write the word "Inne" in this column opposite the name of each person who	er Lunatie.
Number.								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." "Widows," "Widows," "Widows," or "Not Married."	100	Write the word "IRER" in this column opposite the name of each person who speaks IRER only, and the words "IRER & EMELIER" opposite the names of those who can speak both languages. In other cases no easily should be made in this column.	Write the respective infirmities opposite the name of the afficied person.
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4													
9	8												
7	7							-					
•	9												
1	0					-							
	2												
	14		•			-							
1	15			Act 63 Vic., cap. 6, s. 6	(1) that the				I believe the fore	going to be a	true Return.		ed of Family).

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.

Thomas Horan Const (Signature of Enumerator.)

(Signature of Head of Family).