Autuno aus dn L "wo!zpdn230

OF IRELAND, 1901. SUS

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

## FORM A.

No. on Form B. H2

AN 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.

|       |   |  |   |  |                                   |                            |                                   |          |                                       |           |  | az, the olst of h  | 1011, 1001.  |
|-------|---|--|---|--|-----------------------------------|----------------------------|-----------------------------------|----------|---------------------------------------|-----------|--|--|--|
|       |   | NAME and SURNAME.  No Persons assent on the night of Sunday, March Sist, be entered here: EXXEPT those (not enumerated elsewher  | e)  | RELIGIOUS PROFESSION.  | EDUCATION.                        | A                          | GE.                               | SEX.     | RANK, PROFESSION, OR OCCUPATION.      | MARRIAGE. | WHERE BORN.  | IRISH LANGUAGE.  | If Deaf and Dumb;  |
|       | 1 | ucho may be out at WORK OF TRAVELLING, &c., during<br>that Night, and who RETURN HOME ON MONDAY,<br>APRIL 181.<br>Subject to the above instruction, the Name of the Head-<br>the Family should be written first; then the names of<br>his Wife, Children, and other Relatives: then these or | State whether "Head of Family," or "Wife," Son," of "Daughter," or f other relative | 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 vagne term "Protestant," but to enter the name of the Particular Church, Denomination, or Body, to which they belong.] | "Read" only,<br>or "Cannot Read." | Years<br>on last<br>Birth- | Months<br>for<br>Infants<br>under |          | home, should be returned as Scholars. |           | If in Ireland, state in what<br>County or City; if else-<br>where, state the name of<br>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; Blind; Imbecile or Idiot; or Lunatic.                                     |
|       |   | his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servants, &c.  Christian Name.  Surname.  | _ "Servant," &c.  |  |                                   | day. one<br>Year.          | Year.                             |          |                                       |           |  |  | Write the respective<br>infirmities opposite the<br>name of the<br>afflicted person. |
| 1     | 1 | Palrick Mc Maho  | Head of James   | & Roman Cathola  | Readand Write                     | 73                         |                                   | 16       | Farmer                                | Widower   | Co. Carran   |  |  |
| 1     | 2 | Satrick Mo Maho  | don   | Do   | Read and Mrs to                   | 29                         |                                   | Mo       | Farmer.s Son                          | Statoatt  | Lo baran   |  |  |
| 1     | 1 |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
| 13    | Ì |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
|       |   |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
| 1     |   |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
| 1     | T |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
| 1     | - |  |   |  |                                   |                            |                                   | -        |                                       |           |  |  |  |
| 10    | 1 |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
| 10    | Ī |  |   |  |                                   |                            | -                                 | $\dashv$ |                                       |           |  |  |  |
| 11 12 | - |  |   |  |                                   |                            |                                   |          |                                       |           |  |  |  |
|       | - |  |   |  |                                   |                            |                                   |          | 773.                                  |           |  |  |  |
| 13    | - |  |   |  |                                   |                            |                                   |          |                                       |           | - 5  | 7.4  |  |
| 15    | - |  |   |  |                                   |                            |                                   | -        |                                       |           |  |  |  |
| 10    | _ | ** :   |   |  |                                   |                            |                                   |          |                                       |           |  |  | STEPPEN STEP   |

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.

Pálrick Memochon (signature of Head of Family).