CENSUS OF IRELAND, 1901.

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

FORM A.

No. on Form B.

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.

	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 Relative; then those of Visitors, Boarders, Servants, &c. Christian Name. Surname.		RELATION to Head of Family.		EDUCATION.	1	GE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb
Number.			or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.	[Members of Protestant Denomina- tions 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 can "Read and Write," can "Read" only, or "Cannot Read."	on last Inf	Months for Infants under	Write "M" for Males	home, should be returned as Scholars.		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 name of those who can speak both languages. In other cases no entry should be made in this column.	If Deaf and Dumb; Dumb enly; Blind; Imbecile or ddiet; or Lunatic.
							Year.	and "F" for Females.					Write the respective infirmities opposite the name of the afflicted person.
1	2 11		1 1/1		Can read write	45		7	Farmer	Widow	america		
2	1610 -1	Wallace		11 0	can read +write	24		W	Farmers Son.		6 baran		
3	William	Wallace			Can read swribe	14		m	Farmen Son	notmarried	Glavan		
4	Jines	Wallace	Son	Protestant El.	Can readownte	10		m	Ocholas	no Amarries	66 avan		
5													
6													
7													
3													
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)													
2													
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1			•	•								. 3	34
5	71			63 Vic., cap. 6, s. 6 (1)							CARLES CO.		6 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.

Fred. a. Myarry On (Signature of Enumerator.)

I believe the foregoing to be a true Return.

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(Signature of Read of Family).