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. 6

NUMBERS 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.

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.	RELATION to Head of Family. State whether "Head of Family," or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.	RELIGIOUS PROFESSION. 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.]	EDUCATION. State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	AGE. Years on last Birthday.	AGE. Months for Infants under one Year.	SEX. Write "M" for Males and "F" for Females.	RANK, PROFESSION, OR OCCUPATION. 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.]	MARRIAGE. Whether "Married," "Widower," "Widow," or "Not Married."	WHERE BORN. If in Ireland, state in what County or City; if elsewhere, state the name of the Country.	IRISH LANGUAGE. 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.	If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
1	James	Martin	Head of Family	R Catholic	Read and Write	29		M	Agricultural Labourer	Married	Co Cavan		
2	Mary	Martin	Wife	R Catholic	Read and Write	28		F	Shopkeeper Grocer	Married	Co Cavan		
3	Patrick Joseph	Martin	Son	R Catholic	Cannot Read	1	3	M		Not Married	Co Cavan		
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													

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.

John J. Foley Borst *(Signature of Enumerator.)*

I believe the foregoing to be a true Return.

James Martin *(Signature of Head of Family).*