

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

**FORM A.**

No. on Form B. 2

No. on Form B. 2

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.

RELATION to Head of Family	RELIGIOUS PROFESSION	EDUCATION	OCCUPATION	AGE	SEX	COLOR	HEIGHT IN INCHES	WEIGHT IN POUNDS	HABITS	REMARKS
----------------------------	----------------------	-----------	------------	-----	-----	-------	------------------	------------------	--------	---------

SURNAME.		RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot; or Lunatic.	
Christian Name.		SURNAME.	State whether Head of Family, or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," do.	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.]	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years on last Birthday.	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 <i>Scholars</i> . 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 elsewhere, state the name of the Country.	Write the word "IRISH" in this column opposite the name of each person who speaks Irish <i>only</i> , 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.	Write the respective infirmities opposite the name of the afflicted person.
1	John	Elliott	Head of Family	Church of Ireland	Read and Write	74		M	Farmer	Widower	County Limerick		
2	William	Elliott	Son	Church of Ireland	Read and Write	33		M	Farmer	Married	County Limerick		
3	Sarah	Elliott	Daughter	Church of Ireland	Read and Write	23		F		Married	County Limerick		
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

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.

Thos Greenberg

(Signature of Enumerator.)

John Elliott

—(Signature of Head of Family).