CENSUS OF IRELAND, 1901. (Two Examples of the mode of filling up this Table are given on the other side.)

	NAME and SURNAME. No Persons ABREST on the night of Sunday, Murch Met. to be entered here: EXCEPT those (not enumerated elsewhere) who may be out at Works or Thavellens, dc., during that Night, and who heren's Home on Monday. Subject to the above instruction, the Name of the Head of the Yamily should be written first; then the names of his Wife, Children, and other Relatives; then those of Visitors, Boarden, Survanta, dc. Christian Name. Surname.	Head of Family	or Religious Denomination, or Religious Denomination, to which each person belongs. [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.]	EDUCATION.		AGE		Park about in this I	House on th	ne night of SUNI	DAY, the 31st of	MARCH, 190
N. N.		State whether "Head of Family," or "Wife," "Son."		State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."				OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and D
		State whether "Head of Family." "Wife," "Son," "Daughter," or other relative; "Visitor." "Boarder," "Boarder," "Servant," &c.			Years on last Birth- day.	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 Scholars. Before filling this column you are requested to read the Instructions on the other side.	Whether "Married." "Widow." "Widow." or "Not Married."	If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "IRISH" in	Dumb onte.
1	Joseph Hague	to efficie	Clarchefreland	Reade	15		1		of Aos Married."	the Country.	opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Write the respect infirmities opposite name of the afflicted person.
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(Signature of Enumerator.)

(Signature of Head of Family).