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SUS OF IRELAND, 1901.

FORM A.

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, 190

	No Persons assert on the night of the mineral here: EXCEPT those (me pike many he out at Woma or The that Night, and who mercus APRIL 1st		RELATION to Head of Family	ALLIGIOUS PROFESSION.	EDUCATION.	1	GE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	
1	APAIL 1st. APAIL		State whether "Hecd of Family," or Wife, "Son," of "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.	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.]	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.	Charles and the second	Whether "Married." "Widowar,"		Write the word "IRBH" in this column opposite the name of each person who speaks IRBH only, and the words "IRBH & 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; Imbecilesor idiot or Lunatic. Write the respective infirmities opposite to name of the
1		hur	hard Frank	Frish Church	Alad and write	40		m	Form Laboures	marica	6. Cavan	this column.	afflicted person.
2	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED I	hair	wife	2 1 .1 .	Read and write			7		marile)	lo loven		
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				3 Vic., cap. 6, s. 6 (1), tl									

eby 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.

Totmun Constably Signature of Enumerator.)

I believe the foregoing to be a true Return.

(Signature of Head of Family).