of the	MEMBERS of thi	S FAMILY	and their VISITORS	, BOARDERS, SER	O F	6. &c.,	who	slept or abode in this H	Touse on th	e night of SIIND	No. on Form B	
NAME :	AND SURNAME.	RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	1	1	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb
to the above inst nily should be a	he night of Sumlay, March Stat. to these (not enumerated elementers) an or The version of the description parrows Home on Monner, kratt let. rection, the Name of the Head of written first; then the names of other Relatives; then these of arders, Servanis, de.	State whether "Head of Family," or "Wile," "Son," "Daughter," or other relative; "Visitor," "Boarder,"	State here the particular Religion, 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	State here whether he or she can "Read and Write," can "Read "only, or " Cannot Read."	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.	Whether "Married." "Widows." "Widow." or "Not Married."	If in Ireland, state in what County or City; if else- where, state the name of	Write the word "Innsn" in this column opposite the name of each person who speaks Innsn of the words "Innsn & England" opposite the names of these	
e	marka	"Servant," de	1 01.	D				Before filling this column you are requested to read the Instructions on the other side.]	or "Not Married."	the Country.	opposite the names of thoses who can speak both langu- ages. In other cases no entry should be made in this column.	Write the respective infirmities opposite the name of the afflicted person.
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