TURN of the N	ENGERS of th	is FAMILY	FORM A. No. on Form B. <u>Market Structures</u> No. on Form B. <u>Market Structures</u>									
The Persons ADDREST on the sile embered here: HICHET the who may be out at WORK o that Night, and who her APRO	ght of Sunday, March Stat.	to "Banto vhother "Eand of Family." "Eand of Family." "Band of Family." "Banghter." or other relative; "Visitve." "Servant," do.	State here the particular Religion, or Religious Denomination, to which each person belongs. Members of Profestant 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 balong.]	EDUCATION.	AGE.		SEX. RA		MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb
Aparta Argan, and selo se: Aparta habitet is the above instruct the Pamily about be writi- his Wife, Children, and oth Visitors, Boarde Christian Name.				State here whether he or she can "Read and Write," can "Head" 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 house, should be returned as Scholars. Before filling this column you are requested to read the Instructions on the other side.)	Whether "Married." "Widowr," "Widow," or "Not Married."	If in Ireland, state in what County or City ; if elso- where, state the name of the Country.	Write the word "Imms" in this column opposite the	Mind jamb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective infirmitice opposite the name of the afflicted person.
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