## CENSUS OF IRELAND, 1901.

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

## FORM A.

(Signature of Head of Family).

| and who return Home on Monda: APRIL 18.  The instruction, the Name of the He ald be written first; then the name on, and other Relatives; then then thoses, Boarders, Servants, &c.  Be. Surname. | DAY, State whether                    | State here the particular Religion,<br>or Religious Denomination,   | EDUCATION.  | C. (253)   | AGE.   |  |  |                    | No. on Form B  |   |  |
|---|---------------------------------------|---|---|--|--|--|--|--------------------|--|---|--|
| one instruction, the Name of the He<br>ald be written first; then the name<br>con, and other Relatives; then those<br>ors, Boarders, Servants, &c.<br>me. Surname.                                | ead of "Daughter," or other relative. | to which each Denomination,   | State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read." |  | 1  | SEX.                                     | OCCUPATION.  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. | Whether "Married." | WHERE BORN.  | IRISH LANGUAGE.   | If Deaf and Du Dumb only Blind; Imbecile or Idi or Lunatio         |
|   | "Servant," &c.                        | State here the particular Religion,<br>or Religious Denomination,<br>to which each person belongs.<br>[Members of Protestant Denomina-<br>tions are requested not to describe<br>themselves by the vague term<br>"Protestant," but to enter the<br>name of the Particular Church,<br>Denomination, or Body, to which<br>they belong.] |   | Years<br>on last<br>Birth-<br>day.                                     | Month<br>for<br>Infant<br>under<br>one<br>Year | write "M" for Males and "F" for Females. |  |                    | If in Ireland, state in what<br>County or City; if else-<br>where, state the name of | Write the word "Insa" in<br>this column opposite the<br>name of each person who<br>speaks Insat only, and the |  |
| es Gelsenas   | ne Head of                            |   |   |  |  | -  | Before filling this column you are requested to read the instructions on the other side.]  | or Not Married."   | the Country.   | opposite the names of those who can speak both languages. In other cases no entry should be made ?            | Write the respectinfirmities opposite name of the afflicted person |
| ~ Leddy   | Semand                                | 20 20   | Read & weeks  | 34   | 1  | 14                                       |  | Malmania           | Co Cason   |   | /  |
| -   |                                       |   | 20  | 77   |  | Me                                       | Farm Servant   | 20                 | 20   |   | /  |
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|   |                                       |   |   | by certify, as required by the Act 63 Vic., cap. 6, s. 6 (1), that the |  | Leddy Seman Do Do do do 19               |  |                    |  |   |  |