CENSUS OF IRELAND, 1901.

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FORM A.

No. on Form B.

URN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House on the night of SUNDAY, the

1		NAME and SURNAME. No Persons ABSENT on the night of Sunday, March31st, to be entered here: EXCEPT those (not enumerated elsewhere) who may be out at Warner 1.	RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE	z.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHEND DOD!		
Vamber	nber.	be entered here: EXCEPT those (not enumerated elsewhere) who may be out at Work or TRAVELLING, &c., during that Night, and who return Home on Monday, APRIL 1st. Subject to the above instruction, the Name of the Head of the Family should be written first: then the names of his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servants, &c. Christian Name. Surname.	State whether "Head of Family," or "Wife," "Son," "Daughter," or other relative; "Visitor," "Bearder," "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 vague 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."	on last Birth-	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		WHERE BORN. If in Ireland, state in what County or City; if elsewhere, state the name of the Country.	Write the word "IRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & 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; Imbecile or Idiot or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
1	1	Rose blarke	lead of samely Son	Roman Catho				7	Head of Family	Midowes	- County Cours	AND DESCRIPTION OF THE PERSON	afflicted person.
1	1	William Clarke	Son	1 - 1	an read + write			m	- 01		Townty lower	STATE OF THE PERSON NAMED IN	
1	5 2	Rose. Anne Clarke	Son	51	an read swort			m 7	Domestic Servant		bounty Course		
7	8 -				•		-				- Company Contain		
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10	-												
11 12													
13	-												10
14 15	-			y 32									

hereby 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.

(Signature of Enumerator.)

I believe the foregoing to be a true Return.

(Signature of Head of Family).