The State of the s

CENSUS OF IRELAND, 1901.

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

FORM A.

No. on Form B. 5

RETURN 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 31st of MARCH, 1901.

Number.	No Persons absent on the night of Sunday, March 31st, to be entered here: Except those (not enumerated elsewhere) who may be out at Wome or Travelling, de., during that Night, and who nervers Home on Monday, Arms. 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 Reinitves; then those of Visitors, Boarders, Servants, &c. Christian Name. Surname.		State whether "Head of Family," or "Wife," "Son." "Daughter," or other rolative, "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 vague term "Protestant," but to enter the name of the Particular Church, Denomination, or Body, to which they belong.]	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb;
					State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Birth- day.	Year.	"M" for Males and "F" for	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.	"Married." "Widower," "Widow,"	If in Ireland, state in what County or City; if else- where, 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.	Dumb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
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	I hereby certify	, as required	by the	Act 63	Vic., cap.	6, s.	6 (1),	that	the
foregoing	Return is corre	et according	to the	hoet of	me know	lodor	and l	oolief	

I believe the foregoing to be a true Retur

John Hara nork

(Signature of Head of Family).

thy Hard (Signature of Enumer

(Signature of Enumerator.) Witness