Autod

## 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.\_

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.

	NAME and SURNAME.	RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	A	GE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb
DAMMAR.	No Persons absent on the night of Sunday, March 21st, to be entered here: EXERT those (not enumerated elsewhere) who may be out at Wonk or Travellains, i.e., during that Night, and who return Hone on Monday, Arm. 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.	State whether "Head of Family." or "Wife, "Son, "Daughter," or other relative;	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 mame 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."	Years on last Birth- day.	Months for Infants under one Year.	Write "M" for Males and "F" for Females.	School, or receiving regular instruction at home, should be returned as Scholars.	Whether "Married." "Widower," "Widow," or "Not Married."	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 linish only, and the words "IRISH & ENGLISH" opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Blind; Imbecile or Idiot or Lunatic.  Write the respective infirmities opposite to make 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 correct, according to the best of my knowledge and belieft

I believe the foregoing to be a true Retur

- Honor Reills

(Signature of Head of Family).

amen Mewy ous (Signature of Enumerator.)