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

FORM A.

- one for a second of the seco -tent stand the tent of the TRN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this Hous NAME and SURNAME. RELATION to Head of Family No Persons ALSENT on the night of Sanday, March 31st, to be entered here : EXCEPT those (not enumerated elsewhere) who may be out at WORK or TRAVELLING, de., daving that Night, and who RETURN HOME ON MONDAY, APRIL 1st. RELIGIOUS PROFESSION. EDUCATION. RANK, PROFESSION, OR OCCUPATION. AGE. SEX. State here the particular Religion, or Religious Denomination, to which each person belongs. Members of Protestant 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 belong.] State whether 'Head of Family, r " Wife," " Son, " Daughter," or other relative; " Visitor," " Boarder," " Servant," &c. 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. Subject to the above instruction, the Name of the Head of the Family should be written first ; then the names of his Wite, Christen, and other Relatives ; then those of Visitors, Boarders, Servants, &c. Months for Infants under one Year. Write "M" fo Males and "F" fo Female State here whether he or she can "Read and Write," can "Read " only, or " Cannot Read." Years on last Birth-day. Before filling this column you are requeste to read the Instructions on the other side Christian Name. Surname. Roman Cathol Ha Jame 1 a da Wite Farmer 50 20 2 F udge Ulil Do 3 Son an arners Sor Not De F 4 Daughter Lamus Daughter Not Daudito 5 So ŧ chilar Vit Jedde 6 UCK 20 son Do St Daughter 7 10 1dai Do ond Not Do 8 Do ady Son Do Vet Daughte 20 9 # Do Nead 1st 10 11 12 14 13 14 15 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 belief. I believe the foregoing to b

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· Perturn Contraction of the state

John

(Signature of Enumerator.)

No. on Form B. 24 on the night of SUNDAY, the 31st of MARCH, 1901.			
IAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb Dumb only;
ether urried." dower," idow," Married."	If in Ircland, state in what County or City; if else- where, state the name of the Country.	words " Ipien & Ever ton "	Blind; imbecile or Idiot; or Lunatic.
		opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Write the respective infirmities opposite the name of the afflicted person.
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rice	Colavan Color	English	
rio	Co bavan	English	
rried	be bavan	English	
ried	Co Cavan	Inglish !!!!	
erred	bo bavan	English	
rico	6. Cavan	English	
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