## su uumoo aut NSUS OF IRELAND

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

## FORM A.

## stonto the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House NAME and SURNAME. RELATION to Head of Family. No Persons ALSENT on the night of Sunday, March 31st, to be entered here: ENCEPT those (not enumerated elsewhere) who may be out at WORK or TRAVELLING, dc., during that Night, and who RETURN HOME ON MONDAY, APRIL 1st. RELIGIOUS PROFESSION. EDUCATION. RANK, PROFESSION, OR OCCUPATION. AGE. SEX. MARI 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 State the Particular Rank, Profession. Trade or other Employment of each person Children or young persons attending : School, or receiving regular instruction a 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, Children, and other Relatives ; then these of Visitors, Boarders, Servants, &c. Write "M" for Males and "F" fo Female Months for Infants under one Year. State here whether he or she can " Read and Write," can " "Read " only, or " Cannot Read." N Years on last Birth-day. Wha "Ma "Wid "Wid "Not other relative; "Visitor," "Boarder," "Servant," &c. Before filling this column you are requested to read the instructions on the other side. Christian Name. Surname. ames Leddy 1 lead Bomancatholic Real write 75-M farmer Daughter Wid mary Leddy Daughter Momancatholic Bead write 25 2 L Househeeper Noth mich 3 Leddy Bomaneatholic Bed write 2.3 son Me farmer sons Vot M Henry Leddy Son 4 Bomancatholic Bead write 21 M lariner long Net A 5 6 7 8 9 10 .

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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 belief.

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I believe the foregoing to be a

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(Signature of Enumerator.)

No. on Form B. <u>28</u> to the night of SUNDAY, the 31st of MARCH, 1901.			
IAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb :
r 1." 	If in Ireland, state in what County or City ; if else- where, state the name of	Write the word "IRISH" in this column opposite the name of each person who speaks IRISH of LIGHT and the words "IRISH & ENGLISH" opposite the names of these	Dumb only; Blind; imbecile or Idiot; or Lunatic.
urried."	the Country.	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	la Caron	English	
ried	Co Cavan	English	
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