Heart Particular 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.

	No Persons alsent on the night of Sunday, March 31st, to be entered here: Except those (not enumerated elsewhere) who may be out at Work or Travelling, etc., during that Night, and who bettern Home on Monday, April 1st.		RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only;
Number.			State whether "Head of Family," or "Wife," "Son," "Daughter," or	State here the particular Religion, or Religious Denomination, to which each person belongs. (Members of Protestant Denomina- tions are requested not to describe	State here whether he or she can "Read and Write," can	Years for Infant	Months for Infants	"M" for Males	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.	Whether "Married."	If in Ireland, state in what County or City; if else-	Write the word "IRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & ENGLISH"	Blind; imbecile or Idiot; or Lunatic.
2	the Family should be writ his Wife, Children, and oth Visitors, Boards Christian Name.	ten first: then the names of ner Relatives; then those of rrs, Servants, &c. Surname.	"Daughter," or other relative; "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.]	"Read" only, or "Cannot Read."	Birth- day.	one Year.	and "F" for Females.	home, should be returned as Scholars. Before filling this column you are requested to read the instructions on the other side.]	" Widower," " Widow," or " Not Married."	County or City; if else- where, state the name of the Country.	words "IRSH & ENGLISH 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 to name of the afflicted person.
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	I hereby	certify, a	s required	by the	Act 63	Vic., cap.	6, s.	6 (1),	that t	h
Committee	Datam	ia aanmaat	a coomling	to the	bint of	· mar lenam	lodon	and h	oline	

I believe the foregoing to be a true Return.

(Signature of Enumerato .)

(Signature of Head of Family).