A So who we work to babas

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. 6

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. No Persons assent on the night of Sunday, March 31st, to be embroid here: EXCEPT those (not enumerated elsewhere)	RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Duml
Number.	No Persons absent on the night of Sunday, March 31st, to be entered here: EXCEPT those (not enumerated elsewhere) usho may be out at Work or Travelling, the, during that Night, and who return House on Monday. APRIL 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. Christian Name. Surname.	State whether "Head of Family," or "Wife," "Son," "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.]	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years on last In Birth- day.	for sfants inder one	Write "M" for Males and "F" for Females.	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. Before filling this column you are requested to read the Instructions on the other side.]	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 "IMSH" in this column opposite the name of each person who speaks IMSH only, and the words "IMSH & 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; .mbecile or Idiot or Lunatic. Write the respective infirmities opposite to mame of the afflicted person.
1	Hargaret hynch	Head of famil	Roman Capolie	Read twite	60	-	4	James,	Widow	Courty Caran		
3	Margaret hynch	Laughter	Roman batholic	Read Twrite	24	-	n F	Farmer's Daughter	Not Marrie	County Cavair		
5	Patrick hynch	Son	Roman batholic	Read & Write	18		N	Farmer's Lon	Not Married	County lavar		
6	James Rynch	Brother In hear	Roman batholic	Read Twile	84	L	K	Farmer	Not Married	Lourly barav		
3						1						
9												
1	2											
3												
5						-						

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 be a true Return.

margaret Lynch

(Signature of Head of Family).

(Signature of Enumerator.)