Abdrago aut de

## US 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. 16

MBERS 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 absent on the night of Sunday, March 31st, to be entered here: except those (not enumerated elsewhere) who may be out at Work or Travelling, de., during that Night, and who return Home on Monday, April 1st.  Subject to the above instruction, the Name of the Head of his Wife, Children, and other Relatives; then those of Visitors, Boarders, Servants, &c.  Christian Name.  Surname.		RELIGIOUS PROFESSION.	EDUCATION.	AGE.		SEX.	BANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb Dumb only;
Namber.	Subject to the above instr the Family should be w his Wife, Children, and Visitors, Boa			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 Birthday.	Months for infants under one Year.	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.	Whother "Married." "Widower," "Widow," or "Not Married."	If in Ireland, state in what County or City; if size- where, state the name of the Country.	Write the word "IRIBH" in this column opposite the name of each person who speaks IRIBH ordy, and the words "IRIBH & ENGLISH" opposite the name of those who can speak both languages. In other cases no entry should be made in this column.	Blind; .mbecile or idle or Lunatic.  Write the respect infirmities opposit name of the afflicted person
1	John	Lindsay	Head fami	K. Carholic	Mary White	40		No.	Hateman	married	Co Cork	Wrish & English	
2	Jalia	Lindsay	Wife	Catholic	Read 9 Write	54		H	Housekeeper	Mario	Aublin City	English	
3	Margaret	Lindsdag	Daughter	Catholie	Keal Wrile	20		*	Domestie servant	not married	King's County	English	
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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.

John Flynn Constable (Signature of Enumerator.)

I believe the foregoing to be a true Return.

John Lindsay.

\_(Signature of Head of Family).