

# CENSUS OF IRELAND, 1901.

## FORM B. 1.—HOUSE AND BUILDING RETURN.

Parliamentary Division, East Down Peer Law Union, Downpatrick District Electoral Division, Killybegs Townland, Shrigley Street, Barony, Sufferin Parish, Killybegs

NOTE A.—When a Townland or Street is situated in two Parliamentary Divisions, or in more than one District Electoral Division or Parish, or is partly within and partly without a Parliamentary Borough, City, Urban District, Town, or Village, a separate Return should be made for each portion.

| HOUSES.                   |                            |                                                                                                                        |                                                                   |                                                     |                                                                                                                                                           |                                                                                                                                                    |                                                                                                                                                                                                                             |                                                                     |                                                                                                              |            |                 |                                         |                                                        |                                                             |                                         |                                     |                                                                     |                                                                                                                        | FAMILIES, &c.                                                |  |  |  |  |  |  |
|---------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------|-----------------|-----------------------------------------|--------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------|-------------------------------------|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--|--|--|--|--|--|
| No. of House or Building. | Whether Built or Building. | State whether Private Dwelling, Public Building, School, Manufactory, Hotel, Public-house, Lodging-house, or Shop, &c. | Number of Out-Offices and Farmsteadings as returned on Form B. 2. | Is House Inhabited — Yes or No, as the case may be. | PARTICULARS OF INHABITED HOUSES.                                                                                                                          |                                                                                                                                                    |                                                                                                                                                                                                                             |                                                                     |                                                                                                              |            | CLASS OF HOUSE. | No. of distinct Families in each House. | Name of the Head of each Family residing in the House. | No. of Rooms occupied by each Family. (See Note B at foot.) | Total Number of Persons in each Family. | Date on which Form A was collected. | Number of Persons in each Family who were sick on 31st March, 1901. | Name of the Landholder (if any) on whose Holding the House is situated, whether that name appears in column 18 or not. | No. on Form M. 1 if House is on the Holding of a Landholder. |  |  |  |  |  |  |
|                           |                            |                                                                                                                        |                                                                   |                                                     | WALLS.                                                                                                                                                    | ROOF.                                                                                                                                              | ROOMS.                                                                                                                                                                                                                      | Windows in Front.                                                   | Tot the Figures you have entered in columns 6, 7, 8, & 9, and enter the Total for each House in this column. |            |                 |                                         |                                                        |                                                             |                                         |                                     |                                                                     |                                                                                                                        |                                                              |  |  |  |  |  |  |
|                           |                            |                                                                                                                        |                                                                   |                                                     | If Walls are of Stone, Brick, or Concrete, enter the figure 1 in this column; if they are of Mud, Wood, or other perishable material, enter the figure 0. | If Roof is of Slate, Iron, or Tile, enter the figure 1 in this column; if it is of Thatch, Wood, or other perishable material, enter the figure 0. | Enter in this column:— For each House with 1 Room the figure 1 only. For Houses with 2, 3, or 4 Rooms 2, 3, or 4. " 5 or 6 " 5 or 6. " 7, 8, or 9 " 7, 8, or 9. " 10, 11, or 12 " 10, 11, or 12. " 13 or more " 13 or more. | State in this column the exact Number of Windows in Front of House. |                                                                                                              |            |                 |                                         |                                                        |                                                             |                                         |                                     |                                                                     |                                                                                                                        |                                                              |  |  |  |  |  |  |
| (Col. 1.)                 | (Col. 2.)                  | (Col. 3.)                                                                                                              | (Col. 4.)                                                         | (Col. 5.)                                           | (Col. 6.)                                                                                                                                                 | (Col. 7.)                                                                                                                                          | (Col. 8.)                                                                                                                                                                                                                   | (Col. 9.)                                                           | (Col. 10.)                                                                                                   | (Col. 11.) | (Col. 12.)      | (Col. 13.)                              | (Col. 14.)                                             | (Col. 15.)                                                  | (Col. 16.)                              | (Col. 17.)                          | (Col. 18.)                                                          | (Col. 19.)                                                                                                             |                                                              |  |  |  |  |  |  |
| 1                         | Built                      | Private dwelling                                                                                                       | 5                                                                 | Yes                                                 | 1                                                                                                                                                         | 0                                                                                                                                                  | 2                                                                                                                                                                                                                           | 3                                                                   | 6                                                                                                            | 2nd        | 1               | Jane Wilson                             | 3                                                      | 7                                                           | 1901 April 2nd                          | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 2                         | so                         | Goods shop                                                                                                             | —                                                                 | No                                                  | —                                                                                                                                                         | —                                                                                                                                                  | —                                                                                                                                                                                                                           | —                                                                   | —                                                                                                            | —          | —               | —                                       | —                                                      | —                                                           | —                                       | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 3                         | so                         | Private dwelling                                                                                                       | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 3                                                                   | 7                                                                                                            | 2nd        | 1               | Annie Rodgers                           | 4                                                      | 5                                                           | 2nd                                     | 1                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 4                         | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 3                                                                   | 7                                                                                                            | 2nd        | 1               | James M. Garrigle                       | 3                                                      | 4                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 5                         | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 3                                                                   | 7                                                                                                            | 2nd        | 1               | Joseph Laffins                          | 3                                                      | 7                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 6                         | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Wm. McGlogan                            | 3                                                      | 6                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 7                         | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 1                                                                   | 5                                                                                                            | 3rd        | 1               | Alice Rice                              | 3                                                      | 4                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 8                         | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 1                                                                   | 5                                                                                                            | 3rd        | 1               | Catherine Ruiss                         | 3                                                      | 7                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 9                         | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Henry Graham                            | 4                                                      | 4                                                           | 2nd                                     | 1                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 10                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Sarah Long                              | 4                                                      | 4                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 11                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Jane Chambers                           | 4                                                      | 3                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 12                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | James Duffly                            | 4                                                      | 6                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 13                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | James Keenan                            | 3                                                      | 7                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 14                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Joseph Heaney                           | 4                                                      | 6                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 15                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Henry O'Prey                            | 3                                                      | 5                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 16                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | Eliza Tomelty                           | 4                                                      | 8                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |
| 17                        | so                         | so                                                                                                                     | —                                                                 | Yes                                                 | 1                                                                                                                                                         | 1                                                                                                                                                  | 2                                                                                                                                                                                                                           | 2                                                                   | 6                                                                                                            | 2nd        | 1               | William Dunlop                          | 3                                                      | 4                                                           | 2nd                                     | —                                   | —                                                                   | —                                                                                                                      |                                                              |  |  |  |  |  |  |

NOTE B.—If one Room is occupied by more than one Family, the Names of the Heads of Families must be entered in column 13, and the Total Number of Persons in each Family entered in column 15.

NOTE B.—If one Room is occupied by more than one Family, the Names of the Heads of Families so occupying it should be bracketted together in Col. 13, thus:—John Jones, Peter Murray, } and the figure 1 entered in Col. 14, opposite the middle of the bracket. See pattern Table in Instructions, page 9.

[OVER.]