CENSUS OF IRELAND, 1911.

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

FORM A.

No. on Form B.

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 2nd of APRIL, 1911.

Number.	NAME AND SURNAME. No Persons absent on the Night of Sunday, April 2nd, to be entered here; except those (not enumerated elsewhere) who may be out at Work or Travelling, &c., during that Night, and who return Home on Monday, April 3rd. 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.		RELATION to Head of Family. State whether "Head of Family," or "Wife," "Son," "Daughter," or other Relative; "Visitor," "Boarder," "Servant," &c.	ligion, or Religious Denom- ination, to which each person	EDUCATION.	woon state the are in		RANK, PROFESSION, OR OCCUPATION.	PARTICULARS AS TO MARRIAGE.				WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind;
					State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."			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. [No entry should be made in the case of wives, daughters, or other female	Whether "Married," "Widower," "Widow," or "Single."	State for each Married Woman entered on this Schedule the number of :— Completed years the years the If no children born		in what County or	only, and the words	Write the respec-	
										present Marriage has lasted. If less than one year, write "under one."	alive, write "None" in column 11.		City; if elsewhere, state the name of the Country.	those who can speak both languages. In	tive infirmities opposite the name of the afflicted person.
											Total Children born alive.	Children still living.		other cases no entry should be made in this column.	
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.
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I hereby certify, as required by the Act 10 Edw. VII., and 1 Geo. V., cap. 11, that the foregoing Return is correct, according to the best of my knowledge and belief.

_Signature of Enumerator.

I believe the foregoing to be a true Return.

State Mary Foundly Signature of Head of Family.