## CENSUS OF IRELAND, 1911.

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

FORM A.

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.

|      | 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. |  | "Head of Family," or "Wife," "Son," "Daughter," or other Relative; "Visitor," "Boarder," "Servant," | ligion, or Religious Denomination, to which each person belongs.  [Members of Protestant De- | EDUCATION.  | Insert Age opposite each name:—the Ages of Males in column 6, and the Ages of Females in column 7.  For Infants under one year state the age in months, as "under 1 month," "1 month," "2 months," &c.  Ages Ages |                | RANK, PROFESSION, OR OCCUPATION.   | PARTICULARS AS TO MARRIAGE.                 |  |  |   | WHERE BORN.   | IRISH LANGUAGE.  | If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot;                      |
|------|---|--|---|--|---|---|----------------|--|---|--|--|---|---|--|---|
| Dog. |   |  |   |  | State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read." |   |                | of wives, daughters, or other female relatives solely engaged in domestic duties at home.]  Before filling this column you are requested to read the instructions on | "Married," "Widower," "Widow," or "Single." | Completed<br>years the<br>present<br>Marriage<br>has lasted.<br>If less<br>than one<br>year, write<br>"under | Children be present I for child alive, write in column in the children be column in the children | orn alive to Marriage. dren born e "None" umn 11.  Children still | If in Ireland, state in what County or City; if elsewhere, state the name of the Country. | Write the word "IRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & ENGLISH" opposite the names of those who can speak both languages. In other cases no entry should be made in this column. | Write the respective infirmities opposite the name of the afflicted person. |
| -    |   | Company  | &c.   | Body to which they belong!   |   | of<br>Males.  | of<br>Females. | the other side.  |   | one."  | alive.   | living.   |   |  | 15.   |
|      | Christian Name.   | Surname.   | •   | 4.   | 5.  | 6.  | 7.             | 8.   | 9.  | 10.  | 11.  | 12.   | 13.   | 14.  | 15.   |
| -    | 1.  | 2.   | 3.  | A Jakeli   | Read Turk   | 41  | _              | Tublican   | married                                     | _  |  | -   | 606 anu   |  |   |
|      | Rugh  | M. Govern  | Il of faring  | Comon y associa  |   | 011   | 1.0            |  | married                                     | 16   | none   |   | lo bava   |  |   |
| 2    | Passio  | do   | wife  | Lo   | 20  |   | 42             | 6. 01 -1   | Ser 40                                      | _  | _  | _   | tohova  | _  |   |
| 3    | mary  | Smyth  | Serony  | d do   | 20  | •   | 24             | Several sero and   | Ja  |  |  |   | 00  |  |   |
| 4    | 1   |  |   |  |   |   |                |  |   |  |  |   |   |  |   |
| 5    |   |  |   |  |   | 664   |                |  |   |  |  |   |   |  |   |
| -    |   | •  |   |  |   |   |                |  |   |  |  |   |   |  |   |
| 6    |   |  |   |  |   |   |                |  |   |  |  |   |   |  |   |
| 7    |   |  |   |  |   |   |                |  |   |  |  | -   |   |  |   |
| 3    |   |  |   |  |   |   |                |  | 14-11-15                                    |  |  |   |   | -  |   |
| 9    |   |  |   |  |   |   |                |  |   |  |  |   |   |  |   |
| 0    |   |  |   |  |   |   | 40 808         |  |   |  |  |   | /   |  |   |
| 1    |   |  |   |  |   |   |                |  | Marie Color                                 |  |  |   | /   |  | The same  |
| 12   |   |  |   |  |   |   |                |  |   |  |  |   | 1   |  |   |
| 13   |   |  |   |  |   |   | 1              |  |   |  |  |   |   |  |   |
|      |   | THE RESERVE TO THE RE |   |  |   |   |                |  |   |  |  |   | Berne Sales and Market  |  |   |
| .4   |   |  | THE STREET  |  |   |   |                |  |   |  |  |   |   |  |   |

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.

Hugh Movern Signature of Head of Family.

No. on Form B.