## CENSUS OF IRELAND,

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.

|         | 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. |    | Family," or "Wife," "Son," "Daughter," | RELIGIOUS PROFESSION.  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<br>or she can "Read<br>and Write," can | For Infants under one year state the age in |                  | RANK, PROFESSION, OR OCCUPATION.  | PARTICULARS AS TO MARRIAGE. |   |                                     |                              | WHERE BORN.  | IRISH LANGUAGE.   | If Deaf and Dumb;<br>Dumb only;<br>Blind;   |
|---------|--|----|--|---|--|---|------------------|---|-----------------------------|---|-------------------------------------|------------------------------|--|---|---|
| Number. |  |    |  |   |  |   |                  | 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. [No entry should be made in the case of wives, daughters, or other female relatives solely engaged in domestic duties at home.] |                             | years the present Marriage. If no children born alive, write "None" in column 11. |                                     |                              | If in Ireland, state in what County or City: if elsewhere, | only, and the words "IRISH & ENGLISH" opposite the names of those who can speak both languages. In other cases no entry | Write the respec-<br>tive infirmities<br>opposite the name<br>of the afflicted<br>person. |
|         |  |    |  |   |  | Ages<br>of<br>Males.                        | Ages of Females. | Before filling this column you are requested to read the instructions on the other side.  |                             | than one<br>year, write<br>"under<br>one."  | Total<br>Children<br>born<br>alive. | Children<br>still<br>living. |  | should be made in this column.  |   |
|         | 1.   | 2. | 3.                                     | 4.  | 5.   | 6.  | 7.               | 8.  | 9.                          | 10.   | 11.                                 | 12.                          | 13.  | 14.   | 15.   |
| 1 2     | Jane   |    | Head of Farm                           | by Roman Catholic   | Read & Write   |   | 61               | Loding-House-Keeper   | _Single                     |   |                                     | _                            | County Care  | n —   |   |
| 3       |  |    |  |   |  |   |                  |   |                             |   |                                     |                              |  |   |   |
| 5       |  |    |  |   |  |   |                  |   |                             |   |                                     |                              |  |   |   |
| 7       |  |    |  |   |  |   |                  |   |                             |   |                                     |                              |  |   |   |
| 9       |  |    |  |   |  |   |                  |   |                             |   |                                     |                              |  |   |   |
| 10      |  |    |  |   |  |   |                  |   |                             |   |                                     |                              |  |   |   |
| 12      |  |    |  |   |  |   |                  |   |                             |   |                                     | ·                            |  |   |   |
| 14      |  |    |  |   |  |   |                  |   |                             |   |                                     |                              |  |   |   |

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. John Jurian Bound Signature of Enumerator.

I believe the foregoing to be a true Return.

Jane Casserly Signature of Head of Family.