## 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.

|        | 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<br>to Head of<br>Family.  | 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.] | EDUCATION.  | year state the age in |                  | 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. | PARTICULARS AS TO MARRIAGE.            |  |                                     |                              | WHERE BORN.           | IRISH LANGUAGE.  | If Deaf and Dumb;<br>Dumb only;<br>Blind;                                   |
|--------|--|-------------|--|---|---|-----------------------|------------------|--|--|--|-------------------------------------|------------------------------|-----------------------|--|---|
|        |  |             | State whether  |   | State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read." |                       |                  |  | Whether "Married," "Widower," "Widow," | State for each Married Woman entered on this Schedule the number of :— |                                     |                              |                       | Write the word "IRISH" in this column opposite the name of each person   | Imbecile or Idiot ;<br>or Lunatic.  |
| Number |  |             | "Wife," "Son," "Daughter," or other Relative; "Visitor," "Boarder," "Servant," |   |   |                       |                  |  |  | present Marriage has lasted. If less                                   |                                     | te "None"                    | ne" state the name of | who speaks Irish only, and the words "Irish & English" opposite the names of those who can speak both languages. In other cases no entry | Write the respective infirmities opposite the name of the afflicted person. |
| 700    |  |             |  |   |   | Ages of Males.        | Ages of Females. | Before filling this column you are requested to read the instructions on the other side.  8.   | 9.                                     | than one<br>year, write<br>"under<br>one."                             | Total<br>Children<br>born<br>alive, | Children<br>still<br>living. | 13.                   | should be made in this column.   | 15.   |
| 2      | 1.   | 1. 2. 3.    |  |   |   |                       |                  |  |  |  |                                     |                              |                       |  |   |
| .1     | hudith   | Mcleabe     | Head of 7  | amily R batholic  | Read+write  |                       | 72               | I armer  | Widow                                  | 48   | 5                                   | 2                            | leo Caron             |  |   |
| 2      | Michael  | Milabe      | Son  | RE  | Readqurite  | 38                    |                  | Farmers Son  | Single                                 |  |                                     |                              | le barro              |  | /   |
| 3      |  |             | 0  |   |   |                       |                  |  |  |  |                                     | 0                            |                       |  |   |
| 4      |  |             | Y  |   |   |                       |                  |  |  |  |                                     |                              |                       | /  |   |
| 5      |  |             |  | *   |   |                       |                  |  |  |  |                                     |                              |                       | V  |   |
| 6      |  |             |  |   |   |                       |                  | *  |  |  |                                     |                              |                       |  |   |
| 7      |  |             |  |   |   |                       |                  |  |  |  |                                     | -                            |                       |  |   |
| 8      |  |             |  |   |   |                       |                  |  |  |  |                                     |                              |                       |  |   |
| 9      |  |             |  |   |   |                       |                  | *  |  |  |                                     |                              |                       |  |   |
| 10     |  |             |  |   |   |                       |                  |  |  |  |                                     |                              |                       |  |   |
| 11     |  | A CHARLES   |  |   |   |                       | ASTREE .         |  |  |  |                                     |                              |                       |  |   |
| 12     |  | PARTIE LINE |  |   |   |                       |                  |  |  | 100  |                                     |                              |                       |  |   |
| 13     |  |             |  |   |   |                       |                  |  | 10000                                  |  |                                     |                              |                       |  |   |
| 14     |  |             |  |   |   |                       |                  |  |  |  |                                     |                              |                       |  |   |
| 15     |  |             |  |   |   |                       | 141              |  |  | S Linza  |                                     |                              |                       |  |   |

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.

Judith & Cabe Signature of Head of Family.

mark Witness Shichael H. Chalee

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