CENSUS OF IRELAND, 1901.

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

FORM A.

No. on Form B. 7.

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 31st of MARCH, 1901.

Number.	NAME and SURNAME. *No Persons ABSENT on the night of Sunday, March 31st, 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 1st.* *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.		RELATION to Head of Family. State whether "Head of Family," or "Wife," "Son," "Daughter," or other relative; "Visitor," "Boarder," "Servant," &c.	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. State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	AGE.		SEX. Write "M" for Males and "F" for Females	RANK, PROFESSION, OR OCCUPATION. 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.* [Before filling this column you are requested to read the Instructions on the other side.]	MARRIAGE. Whether "Married," "Widower," "Widow," or "Not Married."	WHERE BORN. If in Ireland, state in what County or City; if elsewhere, state the name of the Country.	IRISH LANGUAGE. 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.	If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
	Christian Name.	Surname.				Years on last Birthday.	Months for Infants under one Year.							
1	Joseph	Foster	Head of Family	Methodist	Read & Write	50		M	Farmer	Married	Co Cavan	Irish & English		
2	Eleanor	Foster	Wife	Methodist	Read & Write	25		F	—	Married	do			
3	Joseph	Foster	Son	do	do	17		M	Farmers Son	Not Married	do	Irish & English		
4	Florrie	Foster	Daughter	do	Cannot Read	2		F	—	do	do			
5	J. Howard	Foster	Son	do	do	1		M	—	do	do			
6	Kate	Reilly	Servant	Roman Catholic	Read & Write	17		F	General Farm Servant & Domestic Servant	Not Married	do			
7														
8														
9														
10														
11														
12														
13														
14														
15														

I hereby certify, as required by the Act 63 Vic., cap. 6, s. 6 (1), that the foregoing Return is correct, according to the best of my knowledge and belief.

Matthew Horgan Con. S. *(Signature of Enumerator.)*

I believe the foregoing to be a true Return.

Joseph Foster *(Signature of Head of Family).*