## CENSUS OF IRELAND, 1901.

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

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	NAME and SURNAME.  No Persons ABSENT on the night of Sunday March 21st to	RELATION to	DELICIONE PROFILE						TO OUT TH	e mant of gand	AY, the 31st of 1	MARCH 1901
	No Persons absent on the night of Sunday, March 31st, to be ent-red here: EXCEPT those (not enumerated elsewhere) who may be out at Work or Travelling, &c., during that Night, and who retron Home on Monday, APRIL 1st.				<u> </u>	IGE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dum
	Bubject 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.	Hend of The	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 Perticular Church, Denomination, or Body, to which they belong.]	State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."	Years on last Birth- day.	Months for Infants under one Year.	Write "M" for Males and "F" for Females	School, or receiving regular instruction at home, should be returned as Scholars.	Whether "Married." "Widower," "Widow," or "Not Married."	If in Ireland, state in what County or City; if else- where, state the name of the Country.	Write the word "IRISH" in this column opposite the	Dumb only; Blind; imbecile or Idio or Lunatic.
L	Thomas teilly	Head of tem	Coman Cecholie	an Bead and H.	63	+	Me	Francis	3	PP	entry should be made in this column.	Write the respecti infirmities opposite name of the afficted person.
2	Tusan & Heilly	Wife	es e	antendand his	42		of		Married Barried	Co Cairon	60 6 P	
	Ton Bully	Low	do do	whend and the	18		11	Farmers daughter	Pothari	di Co Cavas	Bant: &	
-	gow Rilly	2 maple	r do	w Bendard His	14		34	Tcholar	197 huss	ed Co Cavas	8 0 6 B	
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ore	I hereby certify, as required by	by the Act 6	3 Vic., cap. 6, s. 6 (1), th	at the								
016	going Return is correct, according t	to the best o	f my knowledge and beli	ief. (Signature of Eng				I believe the foregoing	to be a true H	leturn.		