CENSUS OF IRELAND, 1901.

(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 31st of **MARCH**, 1901.

No. on Form B. 7

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	Bartle	Galligan	Head of family	Catholic	Read only	66		M	Farmer	Married	Co Cavan		
2	Rose	Galligan	Wife	Catholic	Read only	60		F		Married	Co Cavan		
3	Andrew	Galligan	Brother	Catholic	Cannot Read	86		M	Labourer	Not Married	Co Cavan	Irish & English	
4	Michael	Galligan	Son	Catholic	Read and write	29		M	Bar Man	Not Married	Co Cavan		
5	Patrick	Galligan	Son	Catholic	Read and write	21		M	Labourer	Not Married	Co Cavan		
6	Henery	Galligan	Son	Catholic	Read and write	15		M	Scholar	Not Married	Co Cavan		
7	Rose	Galligan	Daughter	Catholic	Read and write	20		F	Dressmaker	Not Married	Co Cavan		
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.

_____ *(Signature of Enumerator.)*

I believe the foregoing to be a true Return.

Witness Michael Galligan

This X Mark Bartle Galligan *(Signature of Head of Family).*