OF IRELAND, 1901.

FORM A.

No. on Form B.

RS 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.

or to the		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 to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE.		SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb
, Juny					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.]	b lite 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.	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.	Whether "Married." "Widowe," "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	If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot; or Lunatic. Write the respective infunities opposite the name of the afflicted person.
1	6	Robb George	byli	Ng fam	Church ghi	hos wit	54		m	Farmer	maria	derry	this column.	afflicted person.
12	L	largary	loghi	wife	00	do	45	7	7	Farmer's wife	0.	00		
1 8	1	man	loglie	dang	00	00	21.	. 1	7	Farmer's daugh.	not.	Do		
1	6	Magre	lasti:	aalig.	00	do	18		7	00	not.	do	_	
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7	.6	Bella	bollie	dans	Do.	20 .	12		M	1	nst-	do		
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11		-												
12	_													
13														
14														
10		I hereby	certify, as required	by the Act	63 Vic., cap. 6, s. 6 (1)									

reby 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.

William Morrow Consignature of Enumerator.)