

STATE

COUNTY

TOWNSHIP OR OTHER DIVISION OF COUNTY

[Insert proper name and, also, name of class, as township]

c 11-3211

NAME OF INSTITUTION

[Insert name of institution, if any, and indicate the lines on

LOCATION.

NAME

RELATION.

Street, avenue,
road, etc.

House number (in
cities or towns).

Number of dwell-
ing house in or-
der of visitation.

Number of family
in order of vis-
itation.

of each person whose place of abode on April 15,
1910, was in this family.

Enter surname first, then the given name and middle
initial, if any.

Include every person living on April 15, 1910. Omit
children born since April 15, 1910.

Relationship of this per-
son to the head of the
family.

1

2

3

4

1

2

3

4

5

DISTRICT No.

SHEET No.

DISTRICT No.

A

CITY

....., ENUMERATOR.

EDUCATION.			OWNERSHIP OF HOME.				Whether a survivor of the Union or Confederate Army or Navy.	Whether blind (both eyes).	Whether deaf and dumb.
Whether able to read.	Whether able to write.	Attended school any time since September 1, 1909.	Owned or rented.	Owned free or mortgaged.	Farm or house.	Number of farm schedule.			
23	24	25	26	27	28	29	30	31	32

- 1
- 2
- 3
- 4
- 5