

Sheet 68 Lellermuller Island, Michail Terrane
Head of fam (see Form B)

Tw.

Full Name of Applicant (if different from name of head of family)
Name of Head of Family (if other than applicant)
with which Applicant resided in 18

Relationship and Occupation

Residence in 18

Country

Barony

Township

Townland

Street (if in a town)

Place in County, Territory

Reason searched by

Extract made by

Certified by

Form required by

Copy dispatched to Applicant's Address

(Serial 7-01-501000-11-A-1-400-114)