21- ayanten/S/21/2274 Application No. 5 Date of receipt, 19,2.15 Disposed of	(222
Date of receipt, 19,2.15 Disposed of	
EXTRACT FROM CENSUS RETURN C	OF 185/
Full Name of Applicant, Octor morris (c. 182	46007/
Address, abbey street, Ballinrobe, Co.	mayo
GOOFFICE.	
Full Names of Father and Mother of Applicant, Peter & Eeles Name of Head of Family (if other than Father)	nmorro
Name of Head of Family (if other than Father) with which Applicant resided in 18	(arran)
Relationship and Occupation,	
Residence in 18 :	N.L.
County, mayo	Nf. 21-ret d 372961.
Rerent Vi	5 372961.
Parish, Ballin robe	WD. 24.2.15.
Townland, Cappacurry	
Street (if in a town), Gloonerneen	
RS.	
Place in Record Treasury,	
Return searched by GAA 32/3/10- 10-	5
Hor. 27.2.15. 12	
Extract made by WOR /3715	
Certified by Hw 1/3/15	
Form replaced by 2 - 3 - 15.	
Copy despatched to Applicant's Address. WD.3.3.15.	
(5601.) Wt.993—50.10,000.5/14.A.T.&Co.,Ltd.	