

*official*

Application No. *N.E.*

Date of Receipt *23 Jan 22* Disposed of *C 22 479*

EXTRACT FROM CENSUS RETURN OF 18

Full Name of Applicant *Thomas Groves*

Address *The Secretary, S.B. of Health  
Edinburgh.*

Full Names of Father and Mother of Applicant *Thos. & Agnes Groves  
(Clydesdale).*

Name of Head of Family (if other than Father)  
with which Applicant resided in 18

Residence in 18 :

County .....

Barony .....

Parish .....

Townland .....

Street (if in a town).....

*See back*

*00  
34-41.*

Place in Record Treasury.....

*J.P.  
22*

Return searched by.....

Extract made by.....

Certified by.....

Form replaced by.....

Copy despatched to Applicant's Address.....