

SCHEDULE } No. 1. POPULATION BY NAME, PERSONAL DESCRIPTION, ETC.  
TABLEAU } POPULATION-NOM, RENSEIGNEMENTS PERSONNELS, ETC.

Province Manitoba

District No.

15 Brandon

R. District No.

51

Enumeration District  
District du recenseur

No.

51

In  
{ date }

Nominal return of living persons by  
Désenrement des vivants par

Frank W. Maken

Enumerator.  
Recenseur.

(City, town, village, township or parish.)  
(Ville, ville, village, canton ou paroisse.)

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Brandon, City

X 301.

NUMBERED IN THE ORDER OF APPEARANCE DU NOMBRE D'ORDRE D'APPELÉE	NAME OF EACH PERSON IN FAMILY, FAMILLE OU FAMILLE DE CHAQUE PERSONNE DANS LA FAMILLE,	RESIDENCE AND PERSONAL DESCRIPTION.										CITIZENSHIP, NATIONALITY AND RELIGION.						PROFESSION, OCCUPATION, TRADE OR MEANS OF LIVING.						WAGE-EARNERS.						INSURANCE HELD AT DATE.						EDUCATION AND LANGUAGE OF EACH PERSON FIVE YEARS OF AGE AND OVER.						INFIRMITIES.					
		Line of habitation: (Town or city, town, village, hamlet or community and not an incorporated place if in township or parish. Name of street, number in city, town or village (Other descriptions)	Sex.	Relationship to head of family or membre de la famille ou membre de la famille à qui il appartient	Month of birth.	Year of birth. Année de naissance.	Age last birthday.	Place of habitation: (Town or city, town, village, hamlet or community and not an incorporated place if in township or parish. Name of street, number in city, town or village (Other descriptions)	Year of immigrat-	Year of immigrat-	Year of naturaliza-	Racial or tribal origin.	Nationality.	Religion.	Chief occupation or trade.	Employment other than at chief occupation or trade, if any.	Employee.	Working on own account (See instructions)	Rate where empl-	Rate where empl-	Rate where empl-	Rate where empl-	Rate of earnings per week or day before last pay-	Up to	Age last birthday.	Cost of insuranc-	Month & year in which last attended school	Can. read.	Can. write.	Language commonly spoken.	Specify age when infirmity appeared.	Date and kind.	Cause of infirmity.	Motive or cause.													
NOMS ET PRÉNOMS DU PERSONNE		RÉSIDENCE ET RENSEIGNEMENTS PERSONNELS										CITOYENNETÉ, NATIONALITÉ ET RELIGION						PROFESSION, EMPLOI, MÉTIER OU MOYEN D'EXISTENCE						EMPLOI						ASSURANCE EN VIGUEUR À LA DATE						INSTRUCTION ET LANGUE DE CHAQUE PERSONNE DE CINQ ANS ET PLUS						INFIRMITÉS SUJETTE À PROBLÈME					
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