

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

Province Ontario District No. 139 South York S. District No. 1 Enumeration District No. 26 in York Township (City, town, village, township or parish.)
Nominal return of living persons by Harry H. Atkinson Enumerator. June 30 Recenseur.

| NUMBERED IN THE ORDER OF VISITATION | 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 | | | | | |
|-------------------------------------|------------------------------------|--|----------------------|------|--|-----------------|----------------|-----------------------|----------------------------|----------------------|---------------------------------------|--------------------------|--------------|----------------|----------------------------|--|-----------|-----------|---------------------------------|--|---|---|--|---------------------------|-----------|------------------------|---------------------------|---------------------|--|--|--|--|--|--|
| | Dwelling House | Name of each person in family, household or institution. | Place of habitation. | Sex. | Relationship to head of family or household. | Month of birth. | Year of birth. | Age at last birthday. | Country or place of birth. | Year of immigration. | Year of naturalization. | Racial or tribal origin. | Nationality. | Religion. | Chief occupation or trade. | Employment other than chief occupation or trade. | Employer. | Employee. | State where person is employed. | Weeks employed in 1910 at chief occupation or trade. | Weeks employed in 1910 at other than chief occupation or trade. | Hours of working time per week at chief occupation. | Hours of working time per week at other than chief occupation. | Months at school in 1910. | Can read. | Can write. | Language commonly spoken. | Level of education. | | | | | | |
| 1 | | Dobbie W. J. | York Township | M. | Head | | | | | | | | | Doctor | | | | | | | | | | | | | | | | | | | | |
| 2 | | Dickson M. | York Township | F. | Wife | | | | | | | | | Superintendent | | | | | | | | | | | | | | | | | | | | |
| 3 | | Balwell | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 4 | | Bass | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 5 | | M. Nelson | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 6 | | Wells | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 7 | | Sharpe | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 8 | | Albright | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 9 | | Quinn | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 10 | | Byrdson | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 11 | | Jones | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 12 | | Jones Daisy | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 13 | | Connelly | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 14 | | Fisher | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 15 | | Lovett | " | F. | Nurse | | | | | | | | | Nurse | | | | | | | | | | | | | | | | | | | | |
| 16 | | M. Rae | " | F. | Stenographer | | | | | | | | | Stenographer | | | | | | | | | | | | | | | | | | | | |
| 17 | | Lynch Wm. | " | M. | Bookkeeper | | | | | | | | | Bookkeeper | | | | | | | | | | | | | | | | | | | | |
| 18 | | Finnerty | " | M. | Doctor | | | | | | | | | Doctor | | | | | | | | | | | | | | | | | | | | |
| 19 | | Ridley Fred | " | M. | Cook | | | | | | | | | Cook | | | | | | | | | | | | | | | | | | | | |
| 20 | | Cummings | " | M. | Cook | | | | | | | | | Cook | | | | | | | | | | | | | | | | | | | | |
| 21 | | Old | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 22 | | Herbert A. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 23 | | Keale A. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 24 | | Freeman R. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 25 | | Appleby W. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 26 | | Wynne J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 27 | | Gabraway J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 28 | | Murphy J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 29 | | Wells R. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 30 | | Stedman C. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 31 | | Spendlove J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 32 | | Stedman J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 33 | | Old E. J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 34 | | Reid J. E. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 35 | | Nigh Margaret | " | F. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 36 | | Heald Fred | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 37 | | Bennett J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 38 | | Vile F. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 39 | | Glynn G. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |
| 40 | | Miles J. | " | M. | Help. | | | | | | | | | Help. | | | | | | | | | | | | | | | | | | | | |

Residence Sanitorium and Hospital

Specify