N. B.—In case of more than one child at a birth, a Separate Return must be made for each, and the number of each, in order of birth, stated.

Write plainly, with unfading ink.

Margin reserved for binding.

RACIAL ORIGIN will be described by stating to what people or tongue each of the parents belongs, whether English, Irish, Scotch, French, German, Russian, Ruthenian, Slovak, Galician, etc. The words "Canadian" or "American" must not be used, as they express nationality or citizenship but not a race or people.

FORM 4.

PROVINCE OF BRITISH COLUMBIA

CERTIFICATE OF REGISTRATION OF BIRTH.

(BY PARENT OR GUARDIAN)

1. PLACE OF BIRTH.					
If in Municipality					
If in City Town or Village Vanc Cure	70	Name		11	76
If in City, Town or Village. Vanc ouve:	(If birth occ	curred in a hospital	l, give its name instead	of Street and Number)	50
2. FULL NAME OF CHILD	izuhara		Mary		River of Time For
	(Surname)			name)	· A
3. Sex of child 4. Twin, triplet or other? 5		d born alive?	6. Legitimate?	7. Date of birtl	h?
To be answered only in the event of plural birth.	Yes Answer, ye		Yes Answer, yes or no.	May 23rd Month, day	1922.
FATHER	AN IVINE		МО	THER	year.
8. Full Name Seikighi Mizuhara	(B) It was	14. Full Ma	aiden Name To	mi Nakagawa	
9. Residence 36 Nana imo St. Vancos (Usual place of abode.) If non-resident, give place and	ver B. C	15. Residen	ce 36 Nanai sual place of abode.) I	mo St. Vance	Ouver B. C.
10. Racial origin Japane se 11. Age last birthday	35 years	16. Racial o	rigin Japane	17. Age last birthday	30 years
12. Birthplace Toyama-Ken, Japan. (City or place, province or country.)		18. Birthpla	ace Toyana-	Ken Japan or place, province or cour	ntry.)
13. Occupation:—		19. Number	of children of the	is mother (includin	g this child.)
(a) Trade or profession. Broker		Living	5 Dead	none Stillborn	none
(b) Business in which employed		20. Occupat	tion, if other tha	n household duties	
21. Name and Post Office address of Informant				St., Vanco u vo	
22. Name of Doctor, nurse or other person in atte			s. Y. Tana		
I certify the foregoing to be true and correct to	o the best of	f my knowled	lge and belief.		
Given under my hand at Vancouver	B.C.	this 9	th	lay of June	1922
		S.	Mizuhara.		
				Signature of In	formant.
I hereby certify that the above return was r	made to me	at	Vanc ouver		
on the	9th	day	of Ju	19	10.00
				Ma	19220
District Registration No.				District R	Paint
				- voir tet R	egistrar.
					1/1

NOTICE.—This return must be made by the Father, Mother, Occupier of house, or other responsible person having knowledge of the birth, and sent to the District Registrar within ten days after the birth.

Neglect to comply with the Act relating to the Registration of Births is subject to a penalty of \$50. (Secs. 26 and 52, Vital Statistics Act, 1920.)

VITAL STATISTICS ACT.

SCHEDULE D.-Particulars of Birth.

To the District Registrar of Births, Deaths, and Marriages,

	etoria,		
1. Date of birth.	April 30th 1915		
2. Place of birth.	235 Powell St.,	Vancouver,	B.C.
3. Sex of child.	male		
4. Name of child.	June Mizuha ra		
5. Name and surname of father.	Seikichi Mizuha	ra	
6. Name and maiden surname of mother.	Tomi Nakagawa		
7. Residence and rank or profession of father.	Broker,		
8. Name of medical attendant or accoucheur and nurse.	Tsune Isomura	(Nurse)	
9. Reason father of child does not report the birth, if the report be made by any other person.			
DATED at Va	ncouver, B.C.	this 17th day of May	, 1945
	(Signature)	Seikichi Mizuhara	Father of child:
(Address in full of n	erson furnishing report)	P.O.Box 1024,	
	a true Copy,		
5,000/4/16 Deputy Reg	Alllistrar, B.D. & M.	Vancouver,	, B.C.



VITAL STATISTICS

Original filed at Vancouver Registry Sep

SCHEDULE D.—Particulars of Bictove

To the District Registrar of Births, Deaths, and Marriages,

Vancouver , B.C. :



Under and pursuant to the provisions of the "Vital Statistics Act" in that behalf, the undersigned certifies to the correctness of the particulars of birth hereinafter contained, that is to say :-

1. Date of birth.	June 22nd, 1917	
2. Place of birth.	722 Cordova St. E., Vancouver	B.C.
3. Sex of child.	Male	
4. Name of child.	Shaw Mizuhara	
5. Name and surname of father.	Seikichi Mizuhara	
6. Name and maiden surname of mother.	Tomi Nakagawa	
7. Place of birth.	Japan	
Mother.	Japan	
S. Residence and rank or profession of father.	Broker	
9. Name of medical attendant or accoucheur and nurse.	Motoi Osawa	
10. Reason father of child does not report the birth, if the report be made by any other person.		
DATED at	Vancouver this 15th day of September	or , 191. 7

(Signature) Seikichi Mizuhara

Father of child.

(Address in full of person furnishing report) 316 Powell St.,

Vancouver....., B.C.

10,000/6/17

P.P. no 77957

Original filed at Vancouver Registry Sept. 15th, 1917.

Vancouver

June 22nd, 1917

722 Cordova St. E., Vancouver

o fail

Shaw Misuhara

Setriohi Misubara

Tomi Haktagawa

Japan

dagal

Broker

Hotol Gesus

Vancouver 15th September

Seiktohi Miswhara

316 Powell St.,

Vancouver

Original Filed at Vancouver Registry January 10th. 1919. VITAL STATISTICS ACT

SCHEDULE D.—Particulars of Birth.

To the District Registrar of Births, Deaths, and Marriages,



V	ane	ouv	er	·····,	RC .
				***************************************	D.U

Under and pursuant to the provisions of the "Vital Statistics Act" in that behalf, the undersigned certifies to the correctness of the particulars of birth hereinafter contained, that is to say:—

1. Date of birth.	On the fourth _{day of} November, 19. 18
2. Place of birth.	522 Cordova Street, East, Vancouver B.C.
3. Sex of child.	Female
4. Name of child.	Kanaco Mizuhara
5. Name and surname of father.	Seikichi Mizuhara
6. Name and maiden surname of mother.	Tomi Nakagawa
7. Place of Father.	In Japan
birth. Mother.	In Japan
8. Residence and rank or profession of father.	Broker
9. Name of medical attendant or accoucheur and nurse.	Mrs. Y. Tanabe
10. Reason parents of child do not report the birth, if the report be made by any other person.	
This space for office use only.	
	BIRTHS MUST BE RECISTERED WITHIN 60 DAYS OF DATE OF BIRTH.
DATED at	
RTIPLED A TRUE C	(Signature) S. Mizuhara (Parent or person standing in place of parent.)
J. Mahr	rig Registrar (Address) P.O. Box 1024
10,000/10/18	Vancouver , B.C.

VITAL STATISTICS ACT. Original Filed at Vancouver Registry, March16-1920.

SCHEDULE D.-Particulars of Birth.

To the District Registrar of Births, Deaths, and Marriages,

5,000/8/19

Vancouver , B.C.:

MAR .16 1920

1. Date of birth	l6th day of February , 19 20	
2. Place of birth.	36 Namaimo St., Vancouver,	B.C.
3. Sex of child.	Mal e	
4. Name of child.	Joe Mizuhara	
5. Name and surname of father.	Seikichi Mizuhara	
6. Name and maiden surname of mother.	Tomi Nakagawa	
Father.	Japan, (Toyama-Prefecture)	
7. Place of birth. Mother.	п	
3. Residence and rank or	Insurance Agent	
profession of father.	36 Nanaimo St., Vancouver, B.C.	
9. Name of medical attendant or accoucheur and nurse.	Yoshi Tanabe	
O. Reason parents of child do not report the birth, if the report be made by any other person.		
	named and the state of the stat	
This space for office use only.	Description of the second	
	BIRTHS MUST BE REGISTERED WITHIN 60 DAYS OF DATE OF BIRTH.	
DATED at	Vancouver, B.C. 16th March this day of	20, 19
	(Signature) S. Mizuhara (Parent or person standing in place of parent.)	
ANATRUE GOPY	(Address) 36 Nanaimo St.,	
1 . / Ulanon	Varjcouver,	, B.C

Particulars
FULL NAME Seikichi Mizuhara
ADDRESS Vancouver, British Columbia, ,Canada
TRADE OR OCCUPATION Insurance Agent and Real Estate Broker
PLACE AND DATE OF BIRTH (WHEN KNOWN) Shimoouramura, Japan
Sth February 1887 -
Nationality
MARRIED. SINGLE Married WIDOWER (WIDOW)
Name of Wife Tomi Mizuhara
Name and Nationality of Parents Japanese
AGE 33 YEARS HEIGHT 5 FEET 1/4 INCHES
COLOUR Yellow COMPLEXION Dark
COLOUR OF EYES Brown COLOUR OF HAIR Black
VISIBLE DISTINGUISHING MARKS None
PRIOR NATURALIZATION CERTIFICATE ISSUED BY County Court,
Vancouver, British Columbia
Gourt Thirtieth Day OF December, 1912-
COUNTERSIGNED CHIEF CLERK OF NATURALIZATION

Var

