

390

OFFICE OF THE CUSTODIAN

JAPANESE SECTION

To be completed by persons of the Japanese race having property in any protected area. The proper administration of this property requires such persons to give full particulars as requested in this form.

PERSONAL INFORMATION

NAME: Doi, Marion (Mie)HOME ADDRESS: Carlisle Cannery, Skeena River, B. C.REGISTRATION NUMBER 11025 SEX: Female AGE: 18OCCUPATION: Cannery worker in summer

(If any business or businesses carried on, state where, under what name and whether carried on by yourself or in partnership with anyone; if partnership, give partner's name.)

EMPLOYER: Carlisle Cannery, Skeena River, B. C.MARRIED? Single,NAME OF WIFE OR HUSBAND: -----ADDRESS OF WIFE OR HUSBAND: -----NAMES OF ANY LIVING CHILDREN: -----ADDRESS OF CHILDREN: -----AGE OF CHILDREN: -----

STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned and particulars given)

1. LOCATION AND DESCRIPTION: None2. BUILDINGS AND OTHER IMPROVEMENTS: -----3. INSURANCE (Give particulars; state where policies are) -----4. TAXES (Amount and where payable) -----5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed) -----6. OCCUPANCY AND LEASES (If vacant so state) -----

7. STATE WHEREABOUTS OF TITLE DOCUMENTS: _____
8. STATE IF ANY OTHER PERSON HAS ANY INTEREST: _____
9. IF FARM LAND STATE CROPS SOWN _____

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: _____ with parents,
_____ ~~living at home with parents, Carfield~~
_____ Cannery, Skeena River, B. C.
2. LANDLORD'S NAME AND ADDRESS: _____
3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: _____
4. STATE WHEREABOUTS OF LEASE: _____
5. SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid) _____
6. IF FARM LAND, PARTICULARS OF CROPS SOWN: _____

STATEMENT OF PERSONAL PROPERTY OWNED:

1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES,
EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: _____
2. HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS _____
3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR
CLAIM ON ANY SUCH PROPERTY _____

4. INSURANCE CARRIED ON ABOVE PROPERTY: _____

5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF
OTHERS: _____

6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) _____

7. BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabouts)

War Savings Certificates, \$12.

8. BANK ACCOUNTS: Japan and Canada Trust Savings Co. Vancouver, B. C. \$100.
amount uncertain, passbook packed away.

9. LIFE INSURANCE: _____

10. INTEREST IN ANY ESTATES OR TRUSTS: _____

11. SAFETY DEPOSIT BOX: _____

LIABILITIES:

1. PERSONAL DEBTS: nil

2. TRADE DEBTS: _____

REMARKS: _____

I certify that the above information is true and complete and fully discloses all my property of every description in any protected area in British Columbia and sets forth all my liabilities direct and indirect.

Dated this 25th day of March, 1942.

(Signature) *Marion Sai*

M. Sai
Witness

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

DATE 23/9/43

Our File No. 390

Full Name DOI, Marion (Mie)
(Surname in Block Letters)

Registration No. 11025 Male - Female ^V
(Check) Age July 12/1923

Former Address Carlisle Cannery, Skeena River, B.C.

Date Evacuated 30/5/42 Naturalized - Canadian-Born - National ^V
(Check)

Present Address Slocan, B.C.

Married - Single ^V
(Check) Name of Wife ----

Name of Husband ----

Name of Mother ^{nee} (UEDA) Nami #11021 Name of Father Morikichi #11024

Names of Children under 16 ---

Requested by C. Girard Registered with Custodian Yes
(Yes or No)

Additional Information Cannery Worker

5/3

File No. 390

April 24th, 1944.

CLAIMS DEPARTMENT

Miss Marion (Mie) DOI - Reg. No. 11025

CREDITORS:-

NO CLAIMS ON FILE AT THIS DATE.

AMcA:ND