## BURLAU HASTINGS PARK OFFICE OF THE CUSTODIAN

- 10 13 6 13

## 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: BAKAI, Ikiko HOME ADDRESS: P. O. Box #23, Ucluelet, B. C.		
OCCUPATION: Housewife		
(If any business or businesses carried on, state where, under what repartnership with anyone; if partnership, give partner's name.)	ame and whether carried	on by yourself or in
EMPLOYER: Mone		
MARRIED? Yes	****	
NAME OF WIFE OR HUSBAND: MEET Shinkichi (	George)	
ADDRESS OF WIFE OR HUSBAND P. O. Box #2	3, Ucluelet, B	. C.
NAMES OF ANY LIVING CHILDREN: Yoshiaki (A	0	
		Mary Control
ADDRESS OF CHILDREN: P. O. Box #23, Ud	cluelet, B. C.	
AGE OF CHILDREN: 6 years old		
STATEMENT OF ALL REAL PROPERTY (Each parcel	must be mentioned and	l particulars given)
1. LOCATION AND DESCRIPTION: Mone		
		1
2. BUILDINGS AND OTHER IMPROVEMENTS:	None	
Z BUILDINGS AND OTHER INTROVEMENTS.		
	- None	
3. INSURANCE (Give particulars; state where policies		
	None	
4. TAXES (Amount and where payable)		
5. ENCUMBRANCES (Including any unregistered claim	s or deposit of title de	ed)
6. OCCUPANCY AND LEASES (If vacant so state)	None	

7. STATE WHEREABOUTS OF TITLE DOCUMENTS:	None .
8. STATE IF ANY OTHER PERSON HAS ANY INTEREST	None
9. IF FARM LAND STATE CROPS SOWN	None
TATEMENT OF REAL PROPERTY OCCUPIED	
(Wooden House)	ise at Ucluelet, B. C.
2. LANDLORD'S NAME AND ADDRESS: Shinkichi (Husband)	Sakai, Ucluelet, B. C.
3. PARTICULARS OF LEASE AND RENT AND DATE TO Mone	WHICH PAID:
4. STATE WHEREABOUTS OF LEASE: None	
5. SUB-TENANTS, IF ANY (Give name, address, rent and to	o what date paid)
IF FARM LAND, PARTICULARS OF CROPS SOWN:	Mone
TATEMENT OF PERSONAL PROPERTY OWNED:  GIVE BRIEF DESCRIPTION AND STATE LOCATION EQUIPMENT AND MACHINERY, STOCK IN TRAD  None	
HORSES, LIVESTOCK AND OTHER ANIMALS, POULT Bone	RY AND PETS
GIVE THE NAME AND ADDRESS OF ANY PERSON CLAIM ON ANY SUCH PROPERTY None	HAVING ANY INTEREST IN, OF

Activities the Alexander

INSURANCE CARRIED ON ABOVE PROPERT	Y: None
5. MORTGAGES, LIENS AND OTHER CLAIM OTHERS:	S ON PROPERTY IN POSSESSION (
MONEYS OWING TO YOU (State if any of these	e debts assigned and if so, to whom)
7. BONDS, DEBENTURES, SHARES, STOCKS OF Dominson of Canada Bond, for \$50.	00, #H227838, and 1 war
Savings Certificate #TA1296198, for possession	\$5.00, all in the owner's
8. BANK ACCOUNTS:	Fone
9. LIFE INSURANCE:	Hone
0. INTEREST IN ANY ESTATES OR TRUSTS	None -
1. SAFETY DEPOSIT BOX:	None
LIABILITIES	
1. PERSONAL DEBTS:	None
2 TRADE DEBTS:	Jone
REMARKS:	None
	omplete and fully discloses all my property imbia and sets forth all my liabilities discount of the set of the
9n Avraight.  Witness  OR DEPARTMENTAL USE	

## INFORMATION FROM R.C.M.P.

Date 15/1/43 SAKAI IK. 180 (mrs. Dhinkichi ( senge ) Ago 400 70, 1911 Male - Female Box 23, Volucler, B.C. @ Hasting Park, Vaner, B.C. Naturalized - Canadian-Born - National (check) Present Mares Slocan BC. Name of Wife Married - Single (check) Name of Husband Shinkichi -12003 ul Name of Father BABA Mosaku Name of Mother TUNAKOS Names of Children under 16 ine hus font thulf Registered with Custodian (yes or no) Requested By Additional Information

The tests

CLAIME DECARRACE

July 27th, 1943,

Res. Ikipo (Shipkishi Leoked Sakat - Res. 14, 12129

ORLD HORSE

NO CLATES on Tile