13/6

OFFICE OF THE CUSTODIAN

JAPANESE SECTION

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	90	900			

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 OGINO, Toshio	
	State of the State
REGISTRATION NUMBER SEX: Not AGE:	
OCCUPATION: Planing Mill Operator	
(If any business or businesses carried on, state where, under what name and whether carried on by you partnership with anyone; if partnership, give partner's name.)	urself or in
EMPLOYER: Sproat Lake Sawmill	
NAME OF WIFE OR HUSBAND: None	er more en en en
ADDRESS OF WIFE OR HUSBAND: None	3. T. 3
NAMES OF ANY LIVING CHILDREN': None	
ADDRESS OF CHILDREN: None	
AGE OF CHILDREN: None	
STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned and particula	iculars given)
1. LOCATION AND DESCRIPTION: None	
2 - BUILDINGS AND OTHER IMPROVEMENTS: None .	
	-
	ra given)
3. INSURANCE (Give particulars; state where policies are) Noze	
4 TAXES (Amount and where payable) None	ial di
5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed)	
6. OCCUPANCY AND LEASES (If vacant so state)	
None	

	TE WHEREABOUTS OF TITLE DOCUMENTS:	None
8. STA	TE IF ANY OTHER PERSON HAS ANY INTEREST	Popula
). IF)	FARM LAND STATE CROPS SOWN	None
	MENT OF REAL PROPERTY OCCUPIED CATION AND DESCRIPTION: None	
2 LAI	NDLORD'S NAME AND ADDRESS: None	
3. PAI	RTICULARS OF LEASE AND RENT AND DATE TO	WHICH PAID: Bone
4. STA	TE WHEREABOUTS OF LEASE: None	
s. sui	3-TENANTS, IF ANY (Give name, address, rent and to	what date paid) None
6. IF1	FARM LAND, PARTICULARS OF CROPS SOWN:	Mone
	MENT OF PERSONAL PROPERTY OWNED: "E BRIEF DESCRIPTION AND STATE LOCATION EQUIPMENT AND MACHINERY, STOCK IN TRADITIONS Tous	ON OF FURNITURE, FIXTURES E AND PERSONAL EFFECTS:
2 HO	RSES, LIVESTOCK AND OTHER ANIMALS, POULT	RY AND PETS
2 110		RY AND PETS

	PILE NO.
4. INSURANCE CARRIED ON ABOVE PROPER	777.
Tone	
5. MORTGAGES, LIENS AND OTHER CLAI OTHERS: Nome	MS ON PROPERTY IN POSSESSION OF
6. MONEYS OWING TO YOU (State if any of the	ese debts assigned and if so, to whom)
7. BONDS, DEBENTURES, SHARES, STOCKS 5 \$4.00 War Savings Certificates	OR OTHER SECURITIES (State whereabouts)
8. BANK ACCOUNTS: None	
9. LIFE INSURANCE: None	
10. INTEREST IN ANY ESTATES OR TRUSTS 11. SAFETY DEPOSIT BOX:	None
2 TRADE DEBTS: X ne	
REMARKS:	
I certify that the above information is true and every description in any protected area in British Coand indirect.	
Dated this 20th day of March	Signature) Machio Agino
FOR DEPARTMENTAL USE	

INFORMATION FROM R.C.M.P.

Registration No. 11325	Male - 1 (check		Age May 36
Former Address	uan Fal	6, R.C.	
Date Evacuated	Var. 26/43 :		ian-Born - National
Present Address	dela	ton Mills	4
Married - Single (check)	Nan	se of Wife	
Nume of MotherO_G Numes of Children unde	INO Maky New	e of Husband	Luchi Pap
Requested by Many Ca	nobell Reg	distered with Custo	dian (Yes or No)

Little Bouldage

OF LOWER SERVICE AND ADDRESS.

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Xerbic Colvo - Reg. 10, 11325

CHICATORS:

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