e Maria de Companyo

FORM "JP"

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.

NAME BAKAMOTO	- 67				
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HOME ADDRESS:	53 Bonson Rd.	, Pitt Mead	lows, B.C.	e en	and the same of a
REGISTRATION N	UMBER 14202	SEX:_	Male	AGE:	19
OCCUPATION:	Student				
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partnership with anyon	businesses carried on, at e; if partnership, give None	partner's name.)	iat name and w	nether carried	on by yours
EMPLOYER :		ndanorama i deni sasti sa para di materia di	erine of articles in the section of the		·#· (**************************
MARRIED?	No	Commence of the Commence of th		errett (1 2000) bereit er er en en fælle senden	
NAME OF WIFE O	R HUSBAND:	None	tt o erakti e i o timbel o copitocosis con is tila kilopelye que	e contrate de la serie mentale de esta atrada está de series está de la contrate de la contrate de la contrate	ra or callered Metallophism
ADDRESS OF WIF	E OR HUSBAND:	None	emontes contrato como extratoro con	n egyt genet for the groups of the of for the t	entron e con contrata de la completa
NAMES OF ANY L	IVING CHILDREN	None		***************************************	
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ADDRESS OF CHII	DREN:	None			
AGE OF CHILDREN	v.	None	R	**************************************	and a section of the property of the section of the
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1. LOCATION AN	ID DESCRIPTION:	None		Andreada (1. jepne er dieter (2007 – 130 (2007) Parisanda (n. epister dieter (2007) – en deutsche (2007) Re	
	ND DESCRIPTION:				
	ND OTHER IMPR		None		
2. BUILDINGS A	ND OTHER IMPR	OVEMENTS:	None None Proposition of the contract of the		
2. BUILDINGS A 3. INSURANCE (ND OTHER IMPR	OVEMENTS:	None None Sare)		
2. BUILDINGS A 3. INSURANCE (4. TAXES (Amount	ND OTHER IMPR Give particulars; st	OVEMENTS:	None sare)	None	
2. BUILDINGS A 3. INSURANCE (4. TAXES (Amount	ND OTHER IMPR	OVEMENTS:	None s are)	None	
2. BUILDINGS A 3. INSURANCE (4. TAXES (Amount	ND OTHER IMPR Give particulars; st	OVEMENTS:	None s are)	None of title deed)	

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8. STATE IF ANY OTHER PERSON HAS ANY INTEREST:	None
9. IF FARM LAND STATE CROPS SOWN	None
STATEMENT OF REAL PROPERTY OCCUPIED	
1. LOCATION AND DESCRIPTION:	None
2. LANDLORD'S NAME AND ADDRESS:	None
3. PARTICULARS OF LEASE AND RENT AND DATE TO WHIC	H PAID:
4. STATE WHEREABOUTS OF LEASE:	None
5. SUB-TENANTS, IF ANY (Give name, address, rent and to what	
	. Mare energy was a statement of the sta
6. IF FARM LAND, PARTICULARS OF CROPS SOWN:	None
STATEMENT OF PERSONAL PROPERTY OWNED:	
STATEMENT OF PERSONAL PROPERTY OWNED:	PERSONAL EFFECTS:
STATEMENT OF PERSONAL PROPERTY OWNED: 1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF	FURNITURE, FIXTURE PERSONAL EFFECTS:
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2 HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AN 3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVIN	None None D PETS None
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3008		FILE No.
OTHERS: None MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) None Rone Rone Rone Rone Ronds, Debentures, Shares, Stocks or other securities (State whereabouts) \$2.00 Wer Saving Stamps in owner's possession. Rone Life insurance sun Life 'Assurance Go., for \$1,000 = 25 Year endow Beneficiary - father Kojiro, \$35.00 yearly. In owner's possessio Foliay number unknown. None None SAFETY DEPOSIT BOX: None ABILITIES: PERSONAL DEBTS: None I certify that the above information is true and complete and fully discloses all my property of very description in any protected area in British Columbia and sets forth all my liabilities direct dindirect. Dated this. Dated this. Oth April Oth April Oth Columbia and sets forth all my liabilities direct dindirect. Oth Columbia April Oth Columbia Apri	4. INSURANCE CARRIED ON ABOVE PROPERTY	None
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I certify that the above information is true and complete and fully discloses all my property of very description in any protected area in British Columbia and sets forth all my liabilities direct not indirect. Dated this day of April 1942. (Signature) Farneth Y Likame Witness		
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Dated this day of Signature) Januarth y Jakany Witness		ACID
Dated this day of Signature) Januarth y Jakany Witness		
Dated this day of Signature) Januarth y Jakany Witness	I certify that the above information is true and comp	lete and fully discloses all
Dated this day of April 1942. (Signature) Fenneth & Jakane Witness	of the state of th	ia and sets forth all my liabilities direct
Dated this day of 1942. (Signature) Fenneth & Jakana Witness	10th At1	
Witness	Dated this day of	1942.
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Witness	Wywww.1	The same
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	OR DEPARTMENTAL VICE	
	TOTAL MENTAL USE	
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INFORMATION FROM R.C.M.P.

nata Ochoslus

our File No. 2235		
Full Name SAKAMOTO (Surne	Kennett me in Block Letters)	
Registration No. 14202.	Mais - Femalo. (check)	New Oct 6, 1922
Former Address P.O. Boso	15, Bitt 11	mendows, B.P.
Date Evacuated Aug. 18/		
Present Address	Lethbeidge,	ale.
Married - Single (check)	Name of Wife_	
Names of Children under 16	Name of Husband ###################################	「関係をディックをおきませんだけ」と行うながます。これでいる方式をはなっていることを表示していません。これではないできないできないできないできない。またなどはないできないできない。またなどはないできないできないできない。
Requested by (Reglatered w	ith Gustadian (Yes or No)
Additional Information	tudent	

SECURE BEVAGERATION

Connects 2010/000 -- Rev. Rev. 37202

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