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BUREAU HASTINGS PARK **J** FILE NO. 2345
 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 INFORMATIONNAME: YASUURA, ShigeruHOME ADDRESS: Ocean Falls, B.C. (Drawer 8)REGISTRATION NUMBER 11464 SEX: Male AGE: 46OCCUPATION: Mill worker

(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: Pacific Mills, Ocean Falls, B.C.MARRIED? YesNAME OF WIFE OR HUSBAND: TETSUADDRESS OF WIFE OR HUSBAND: Ocean Falls, B.C.NAMES OF ANY LIVING CHILDREN: NoneADDRESS 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: Two-room dwelling at Ocean Falls, B.C.
House No. 1841

2. LANDLORD'S NAME AND ADDRESS: Pacific Mills, Ocean Falls, B.C.

3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: \$7.50 per month
paid up to date

4. STATE WHEREABOUTS OF LEASE: None

5. SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid) None

6. IF FARM LAND, PARTICULARS OF CROPS SOWN: None

STATEMENT OF PERSONAL PROPERTY OWNED:

1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES,
EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: -----

None

2. HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS None

3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR
CLAIM ON ANY SUCH PROPERTY None

4. INSURANCE CARRIED ON ABOVE PROPERTY: _____

5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF
OTHERS: None

6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) None

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

\$700 in Victory Bonds in my possession in my safety deposit box
Sixteen \$50 War Savings Certificates in "my possession" " "
\$600 royalties in an oil company bought from C.C. Grosse & Co., Vancouver

8. BANK ACCOUNTS: None

9. LIFE INSURANCE: \$1000 ²⁰-year endowment policy with the Imperial Life Co.
Premiums paid up to date, policy in safety deposit box, Bank of Commerce

10. INTEREST IN ANY ESTATES OR TRUSTS. None

11. SAFETY DEPOSIT BOX Bank of Commerce, East End Branch, Vancouver, B.C.
All above papers in safety deposit box. My wife and I each have a key.

LIABILITIES:

1. PERSONAL DEBTS: None

2. TRADE DEBTS: None

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 9th day of April 1942

[Signature]
Witness

(Signature) [Signature]

FOR DEPARTMENTAL USE _____

[Handwritten mark]

File No. 2365

February 15th, 1945

CLAIMS DEPARTMENT

Shiguro YAGURA - Reg. No. 11464

CREDITORS:-

NO CLAIMS ON FILE.

MAILED

2243

May 29, 1944.

Mr. Shigeru YASUURA,
Registration No. 11464,
LILLOET, B. C.

Dear Sir:

Re: Imperial Life Pol. #118432

We have received from the Imperial Life
and enclose herewith their cheque for \$1,051.58
payable to your order in settlement of your matured
policy above numbered. The Insurance Company's covering
letter is also enclosed.

Yours truly,

S. M. Gibson,
Insurance Department

SMG:JS

Encl.