作为"种种"的"特别"。 4105

## 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				
NAMEL SUJADA Madato				
HOME ADDRESS: 1550 Morth Rd., Ham Heatminister, B.G.				
REGISTRATION NUMBER				
OCCUPATION: Farmer				
partnership with anyone; if partnership	ed on, state where, under what name and whether carried on by yourself p, give partner's name.)  — father.			
MARRIED?				
	Local MCCA Company of the company of			
ADDRESS OF WIFE OR HUSBA				
NAMES OF ANY LIVING CHIL				
ADDRESS OF CHILDREN	None			
	PROPERTY (Each parcel must be mentioned and particulars gi			
STATEMENT OF ALL REAL P	PROPERTY (Each parcel must be mentioned and particulars gi			
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1. LOCATION AND DESCRIPT  2. BUILDINGS AND OTHER	PROPERTY (Each parcel must be mentioned and particulars gi			
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2. BUILDINGS AND OTHER  3. INSURANCE (Give particula)	PROPERTY (Each parcel must be mentioned and particulars gi			
2. BUILDINGS AND OTHER  3. INSURANCE (Give particula)	PROPERTY (Each parcel must be mentioned and particulars gi			
1. LOCATION AND DESCRIPT  2. BUILDINGS AND OTHER  3. INSURANCE (Give particular  4. TAXES (Amount and where I	PROPERTY (Each parcel must be mentioned and particulars gi TION: Mana  IMPROVEMENTS: Mana  Ars; state where policies are) Mana  payable) None			
1. LOCATION AND DESCRIPT  2. BUILDINGS AND OTHER  3. INSURANCE (Give particula  4. TAXES (Amount and where particula)	PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each parcel must be mentioned and particulars gi TION:  NAME OF THE PROPERTY (Each par			
3. INSURANCE (Give particular for the following statement of all real for the following statement of t	PROPERTY (Each parcel must be mentioned and particulars gi TION:  INTROVEMENTS:  NOTE:  Tars; state where policies are)  NOTE:  Payable)  Note:  Yours  any unregistered claims or deposit of title deed)			

	STATE WHEREABOUTS OF TITLE DOCUMENTS:	None
8	STATE IF ANY OTHER PERSON HAS ANY INTEREST:	None
9. ]	F FARM LAND STATE CROPS SOWN	None
77/47	EMENT OF REAL PROPERTY OCCUPIED	
	OCATION AND DESCRIPTION:	None
2. 1	LANDLORD'S NAME AND ADDRESS:	Mone
). I	PARTICULARS OF LEASE AND RENT AND DATE TO WHI	CH PAID:
		None /
4. S	STATE WHEREABOUTS OF LEASE:	None
s. s	SUB-TENANTS, IF ANY (Give name, address, rent and to who	at date paid)
		None
i, 1	F FARM LAND, PARTICULARS OF CROPS SOWN:	Mone
TA:	F FARM LAND, PARTICULARS OF CROPS SOWN:  TEMENT OF PERSONAL PROPERTY OWNED:  GIVE BRIEF DESCRIPTION AND STATE LOCATION  EQUIPMENT AND MACHINERY, STOCK IN TRADE A	OF FURNITURE, FIXTURES.
	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION	OF FURNITURE, FIXTURES
TA	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION	OF FURNITURE, FIXTURES, ND PERSONAL EFFECTS:
TA	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION	OF FURNITURE, FIXTURES, ND PERSONAL EFFECTS:
TIAN 1.	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION	OF FURNITURE, FIXTURES, ND PERSONAL EFFECTS:
TA)	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION EQUIPMENT AND MACHINERY, STOCK IN TRADE A	OF FURNITURE, FIXTURES, ND PERSONAL EFFECTS:
77A' 1	FEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION EQUIPMENT AND MACHINERY, STOCK IN TRADE A	OF FURNITURE, FIXTURES, ND PERSONAL EFFECTS:  None  AND PETS  None
7TA1 1. (	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION EQUIPMENT AND MACHINERY, STOCK IN TRADE A	OF FURNITURE, FIXTURES, ND PERSONAL EFFECTS:  None  None  None

	FILE No. 4105
INSURANCE CARRIED ON ABOVE PROPERTY:	None
. MORTGAGES, LIENS AND OTHER CLAIMS ON PI	ROPERTY IN POSSESSION OF
OTHERS:	None
MONEYS OWING TO YOU (State if any of these debts ass	igned and if so, to whom)
	None
, BONDS, DEBENTURES, SHARES, STOCKS OR OTHER	SECURITIES (State whereabouts)
1 \$5.00 War Saving Certificate - in owner	12. [12] [12] [12] [13] [14] [14] [15] [15] [15] [15] [15] [15] [15] [15
8. BANK ACCOUNTS:	None
LIFE INSURANCE. Sun Life AssuranceeCo., fo	or \$1,000.00 - Penefician
father - actaro, premium \$24.80 annual	
Policy in owner's possession:  O. INTEREST IN ANY ESTATES OR TRUSTS.	
O. INTEREST IN ANY ESTATES OR TRUSTS	Pope
I. SAFETY DEPOSIT BOX	Hone
LIABILITIES	None
1. PERSONAL DEBTS:	*
	None
2. TRADE DEBTS:	none
I, the undersigned, hereby voluntarily turn over to the Cus	
area as set out above, excepting fishing vessels, deposits of more or other securities, if any.	ney, shares of stock, debentures, bond
I certify that the above information is true and complete a	nd fully discloses all my property o
every description in any protected area in British Columbia and indirect.	
Dated this 15th day of April	
	DI Dunad
A Min Do Ollains	
Witness	
FOR DEPARTMENTAL USE	

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

- din-	Date :
Our File No. 4105	
Pull Regge S/cN/AI	(Surname in Place Letters)
Registration No. 12686	Mais - Female Age 21-2-24
Fermer Address Myrith	Rd, RATH New West menstel
Date Evacuated april	20/42 Naturalized - Canadian-Born - National (oheak)
	(ohesk)
Present Address Rock	Ly MI House, alta
	Lethbridge alta
Married - Single (oheok)	Name of Wife —
, mi .	Name of Husband
Name of Mother (Juki-)	Name of Husband  2597. Name of Father Nacland 2598
Names of Children under 16	
Requested by 1/80	Registered with Custodian
	(Yes or No)
Additional Information	Larrus -

## LIFE INSURANCE

Mr. Masato Sunada 100, 2105

Reg. No. 12676

File No. 4105

Company Sun Life

Policy No. 2225736

Premium - \$24.80

Annually, Semi-annually or monthly Payable:

December

REMARKS:

Letter went 2014/43