TREATH IN THIS 4108

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.

property requires such persons to give full particulars as requested in this for
PERSONAL INFORMATION
NAME: BETOEBIRO, Bhizuko Mrs. Baburo
HOME ADDRESS: Yale Rd., Westminster, B.C.
REGISTRATION NUMBER 12660 SEX: Female AGE: 35
OCCUPATION: / Housewife
(If any business or businesses carried on, state where, under what name and whether carried on by yourself or partnership with anyone; if partnership, give partner's name.)
EMPLOYER:
MARRIED?Yes
NAME OF WIFE OR HUSBAND: Saburo
ADDRESS OF WIFE OR HUSBAND: Yale Rd., New Westminster, B.C.
NAMES OF ANY LIVING CHILDREN: Kazumasa (M) Minoru (M) Shoso Joe (
ADDRESS OF CHILDREN: Yale Rd., New Westminster, B.C. (Minoru live in Japan)
AGE OF CHILDREN: 18, 9, 1
STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned and particulars given
1. LOCATION AND DESCRIPTION: None
2. 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: Five-room frame house at Yale Rd., New
Westminster, B.C.
2. LANDLORD'S NAME AND ADDRESS: My husband
3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: None.
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, FIXTURE 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, O
CLAIM ON ANY SUCH PROPERTY None

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MORTGAGES, LIENS AN	ND OTHER CLAIM			
MONEYS OWING TO YOU	J (State If any of the	a debta nasigni	ed and if eq. to	whom) Hens
7. BONDS, DEBENTURES, S None	SHARES, STOCKS O	R OTHER SE	CURITIES (S	
B. BANK ACCOUNTS:No.				
9. LIFE INSURANCE: \$100 Beneficiery my son \$1000 in the Hippor	Minoru. Folio Seimen Co., J	ay in my p		
o. INTEREST IN ANY ESTA	TES OR TRUSTS.	NOTE		
		None		
II. SAFETY DEPOSIT BOX:		None	E.	
I. SAFETY DEPOSIT BOX:	None		E.	
II. SAFETY DEPOSIT BOX: LIABILITIES: 1. PERSONAL DEBTS: 2. TRADE DEBTS:	None			
IL SAFETY DEPOSIT BOX: LIABILITIES: 1. PERSONAL DEBTS: 2. TRADE DEBTS:	None			
IL SAFETY DEPOSIT BOX: LIABILITIES: 1. PERSONAL DEBTS: 2. TRADE DEBTS:	None			
I. SAFETY DEPOSIT BOX: LIABILITIES: 1. PERSONAL DEBTS: 2. TRADE DEBTS: Li the undersigned bereby area as set out above, excepting of other securities, if any, Li certify that the above info	None None None None Voluntarily turn over g fishing vessels, deponention is true and	to the Custod osits of money, complete and	ian all my prop shares of stoo	erty in the protecteck, debentures, bond
I. SAFETY DEPOSIT BOX: LIABILITIES: 1. PERSONAL DEBTS: 2. TRADE DEBTS: Lithe undersigned, hereby area as set out above, excepting or other securities, if any.	None None None None None In the second of the second	to the Custod osits of money, complete and dumbia and so	ian all my programs of store	serty in the protecte ck, debentures, bond all my property of my liabilities direct

INFORMATION FROM R.C.M.P.

Our File No. #108	UGEHIRO, Shizuk (Surnama in Block	Date 17/5/45. Ko (Mrs Sabura) (Letters)
Registration No. /a		
Former Address	ale Bd, Saut	<u> Wüstminstay Blo</u>
Date Evacuated	11.20/42 Nature	nlized - Canadian-Born - National (check)
Present Address	C/o angels	Baras Raymore. Alta alta
Married - Single (check)	Name of W	
Nume of Mother (MIKA)	O) Kana (dec) Name of 1	Father (MATSUPA) & Jameyo .
Numes of Children under		
Requested by Additional Information		red with Custodian

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(Information supplied by Ins. Co.)

LIPE DISTRIBUTION

Mame Mrs. S. Shigehiro
Vo Angelo Bosso.
Raymond Alla

Company Sun Life

File No. 4108 Reg. No. 12660

Agency Calgary

Policy No. 2263195

Premium - \$ 51.75

Annually, Semi-annually or monthly

Day 5 October Month

REMARKS:

Miles sent 26/4/43