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.

PERSONAL INFORMATION		
NAME BAKAI, Iwakazu	partiados a un regio esta esta esta actual a atambien en entre inharita de professor de la composición de la c	建铁矿 电电阻 二烷钠镍
HOME ADDRESS: P. O. Box 184, Stevesto	1. B. C.	
REGISTRATION NUMBER 04730 SEX:	AGE: 24	
OCCUPATION: Fisherman		
(If any business or businesses carried on, state where, under what name partnership with anyone; if partnership, give partner's name.)		self or i
EMPLOYER: Worked for himself.	assigni ann ceannasa ar mea cairleana a ceann se a ceann agus an istigniasa.	to the company of the con-
MARRIED?	ergelst af the activities the edition of the entire of the control of the state of	er Brazanti encreta
NAME OF WIFE OR HUSBAND:	one	
ADDRESS OF WIFE OR HUSBAND:	one	and the same of th
NAMES OF ANY LIVING CHILDREN	one	*************
	one	
ADDRESS OF CHILDREN:	or against the control of administrative for the control of the co	September 1980 - Cope
	one	
		s giver
AGE OF CHILDREN: STATEMENT OF ALL REAL PROPERTY (Each parcel must) 1. LOCATION AND DESCRIPTION:	t be mentioned and particular	
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AGE OF CHILDREN: STATEMENT OF ALL REAL PROPERTY (Each parcel must). 1. LOCATION AND DESCRIPTION: 2. BUILDINGS AND OTHER IMPROVEMENTS:	t be mentioned and particular	
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STATEMENT OF ALL REAL PROPERTY (Each parcel mu 1. LOCATION AND DESCRIPTION: 2. BUILDINGS AND OTHER IMPROVEMENTS: 3. INSURANCE (Give particulars; state where policies are)	None None	
STATEMENT OF ALL REAL PROPERTY (Each parcel mu 1. LOCATION AND DESCRIPTION: 2. BUILDINGS AND OTHER IMPROVEMENTS: 3. INSURANCE (Give particulars; state where policies are) 4. TAXES (Amount and where payable)	None None None None	

7.	STATE WHEREABOUTS OF TITLE DOCUMENTS: None
8.	STATE IF ANY OTHER PERSON HAS ANY INTEREST: None
9.	IF FARM LAND STATE CROPS SOWN None
a	
STA	ATEMENT OF REAL PROPERTY OCCUPIED
1.	LOCATION AND DESCRIPTION: Cannery House, Gulf of Georgia
	Canning Co. Ltd., Steveston, B. C.
2.	LANDLORD'S NAME AND ADDRESS: Gulf of Georgia Canning Co. Ltd., Steveston, B. C.
3	PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:
	Not known.
4.	STATE WHEREABOUTS OF LEASE: None
5.	SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid). None
ennoted to	
-	
6.	IF FARM LAND, PARTICULARS OF CROPS SOWN: None
estimate su	
	GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
Property of the second	
2.	HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS
and the second	None
A season	
3.	GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR CLAIM ON ANY SUCH PROPERTY. None

	HERS:	THER CLAIMS ON PR	None	or a contract the second contract of the seco
	S OWING TO YOU (Stat	e if any of these debts assig	ned and if so, to w	hom)
A fe		S, STOCKS OR OTHER S	그리다 하는 것이 많은 이 아이들 것이다. 그리아 아이를 하지 않는데 없다.	
B. BANK A	CCOUNTS	No.		Charles and Control of the same and
		Assurance Co. Ltd		в. с.,
		not known, policy		ini dhela i sankanin kan afankasan
10. INTERES	ST IN ANY ESTATES OR	R TRUSTS No	DN6	1
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II. SAFETY	DEPOSIT BOX:	Non	le	nieną jakonomie, aksi (da
LIABILITIES	•			
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2. TRADE I	DEBTS:	None	e de la seguina e la seguina de mandane e la seguina e e este se este seguina de demonitario del seguina de la	*****
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REMARKS:		None	and the state of t	
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and indirect.	hat the above information on in any protected area i	is true and complete and in British Columbia and se	fully discloses all	my proper iabilities
Dated this.	15th day of		1942.	
1/1		(Signature)	Jusky	
, W	oodward Witness	······································		A distribution
FOR DEPART	MENTAL USE	-	minaje ko sebina i zegajuma i sepajuma ing na sebina i sebina i	1900 to 1800 to 1900 to 1800 to

H34 MIONN	Date June 18/43.
Our File No.	
Full Name SAKAI /4	vakazıı
	Surname in Block Letters)
Registration No. 04730	Male - Female Age Aug. 22/
Former Address P.O.B.	osc 184, Steveston, B.C.
Date Evacuated	Naturalized - Canadian-Born - National (check)
Present Address	Interned May 29/1.
Married - Single (check)	Name of Wife
Name of Mother (YAMAMOI	Name of Husband Name of Father Kakei (Kake)#/
Names of Children under 16 diva	
Requested by Co	Pegistered with Custodian (Yes or No)
Additional Information Cl	erkx Fisherman-

NOTION OF RELEASE STATES OF STATES O

9EP 2 1/43

Internee's No. J. 139

NameSAKAI, IWakazu

Camp ANGLER, Ontario

Residence:

At time of internment: STEVESTON, B.C.

To which proceeding on release: TORONTO, Onterio

Date Released from Internment 25th August, 1945.

Authority R.S.M.P. File No. C. 11-19-2-15, deted 15th JUNE , 1943.

Conditions Released conditionally upon his acceptingemployment of the B.C. Security Commission, and that he comply with regulations issued affecting him.

(H. N. Streight); Colonel, Director, Frisoners of War.

Ottawa, 28th August, 1943.

Copy:

R.C.M.P. Custodian Dependents' Section Chief Postal Censor Fyle

POW 20

me 26 1013

LIVE DISURANCE

Mano MR. INAKAZU SAKAI

Angles, Ont

File No. 4134 877 Reg. No. (17)30

Company Sun Life Insurance

Agency Vancouver

Policy No. 2305296

Premium - \$ 50.55

Annually, Semi-annually or monthly Payable:

Day 9th Month December

REMARKS:

THE CESTODIAN DEPARTMENT OF THE SECRETARY OF STATE VICTORIA BLDG., 7 CAGONNOR STREET OTTAMA, CANADA

THE CUSTODIAN REGULATIONS RESPECTING TRADING WITH THE ENEMY (1939)

FORM "D"

From the Sun Life Assurance
Company of Canada Date of Discovery. . August 1942.

Particulars of Life Insurance Policies and Annuity Contracts on Life of an Enemy

E E Sanarata forme should be used for each nolicy

Policy No.	2,305,295	Date of Policy (i.e., due date of first regular premium) Dec. 9	
owner - if third party insurance	- Same Iwakazu Sakai Born August 22, 1916 Address Steveston, B.C.	Plan of Policy 20 Year endowment Sum Assured 98 install Assured 98 Can.\$1,000 Premium - Amount Can.\$50.55	File No. Ans.
	Address -	How Payable annually Due Dates Dec. 9th	
erestelarios	- Names Kahei Sakai Addresses - Relationship to Life Insured father	Policy Loans (automatic or otherwise) Approximate Cash Value, if any, including dividends, after deducting all policy indebtedness	
ecord of Current other than to com policy loan)		Nature of Automatic Non-forfeiture autom Provision	atic premium losn
gimm mames and s	Limenses –	Approximate Cancellation Date under Automatic Non-forfeiture Dec.	1951

to reason of making payments to the Competer on hehalf of the policy-bolom at temporary records for collections only have now been beed in Montreal

139-04730

CANADA

DEPARTMENT OF THE SECRETARY OF STATE

OFFICE OF THE CUSTODIAN

ADDRESS ALL COMMUNICATIONS TO THE CUSTOGIAN'S OFFICE FLEASE NEFEH

Victoria Building, 7 O'Connor St., Ottawa, Ont.

HE. IWAKAZU JAKAI PILE NO. MADELLO Dear Sirs: In order to assist this office in the administration of your property, kindly submit a complete statement covering the following with full particulars in each case; should you have nothing to report, insert the word "NIL", sign your pame and please return this letter at once: A BANK ACCOUNTS: 1. Name of Bank 2. Branch..... 3. Cash Balance..... 1. Description and Quantity. I. J. B SMOURITIMS: 2. Where deposited..... REAL ESTATE: 1. Description....LANC Steveston 2. Location ... 3. Municipality. Richmond Steveston 1. Name of Company, Jun Lite Ins. D INSURANCE: 2. Number of Policies 3. Amount of each . 7.10.00 60 E CLAIMS: 2. Amount..... DEBTS: 2. Amount 3. Name and address of creditor Witness If you have appointed a relative or a friend to look after your interests, kindly furnish his name and address. NAME Yours very truly,

ADDRESS

Assistant Deputy Custodian