

5001

PORT HAMMOND
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: OKABE, SatoruHOME ADDRESS: R. End Ave., R.R. No. 1, Port Hammond, B.C.REGISTRATION NUMBER 02916 SEX: Male AGE: 19OCCUPATION: Mill hand

(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: Woodfibre in the B.C. Pulp and Paper Co.,MARRIED? NoNAME OF WIFE OR HUSBAND: ---ADDRESS OF WIFE OR HUSBAND: ---NAMES OF ANY LIVING CHILDREN: ---ADDRESS OF CHILDREN: ---AGE OF CHILDREN: ---**STATEMENT OF ALL REAL PROPERTY** (Each parcel must be mentioned and particulars given)1. LOCATION AND DESCRIPTION: None /2. BUILDINGS AND OTHER IMPROVEMENTS: None /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: Seven-room frame dwelling house at 2nd Ave.,
R.R. No. 1, Port Hammond, BC
2. LANDLORD'S NAME AND ADDRESS: My brother Katayoshi, OKABE
2nd Ave., R.R. No. 1, Port Hammond, BC
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: strawberries, raspberries,
asparagus, beans, fruit trees.

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: None

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)

Twelve \$¹⁰ War Savings Certificates at home.

8. BANK ACCOUNTS: None

9. LIFE INSURANCE: \$1000 Sun Life Ins. Co., Beneficiary my father
Terukichi OKABE, 40-year endowment, Policy No. 2236234 in my possession

10. INTEREST IN ANY ESTATES OR TRUSTS: None

11. SAFETY DEPOSIT BOX: None

LIABILITIES:

1. PERSONAL DEBTS: None

2. TRADE DEBTS: None

I, the undersigned, hereby voluntarily turn over to the Custodian all my property in the protected area as set out above, excepting fishing vessels, deposits of money, shares of stock, debentures, bonds or other securities, if any.

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 17th day of April 1942.

(Signature) J. Okabe

J. T. Williams
Witness

FOR DEPARTMENTAL USE

✓
INFORMATION FROM R.C.M.P.

Date Apr. 15/43

Our File No. 5001

Full Name OKABE Satoru
(Surname in Block Letters)

Registration No. 02916 Male - Female
(check) Age May 27, 1922

Former Address Woodlawn, B.C.

Date Evacuated May 22 Naturalized - Canadian-Born - National
(check)

Present Address Elm Creek, Man.

Married - Single
(check)

Name of Wife —

Name of Husband —

Name of Mother OKABE Nobu Name of Father Terukichiro 557

Names of Children under 16 #14064 5000

Requested by ECT Registered with Custodian —
(Yes or No)

Additional Information Mill Hand

OUTLINE OF INFORMATION REQUIRED TO COMPLETE THIS FILE: No. 5001

Name of Owner of Property OKABE, Satoru (Mr.) Registration No. 02916
 Address: Police Registration Woodfibre, B. C.
 As declared 2nd Ave., R.R. #1, Port Hammond, B. C.
 To which evacuated Elm Creek, Man.
 Date of First Evac. May 22/
 Internec or enemy alien relationship _____ Enemy File No. _____
 Family relationships: husband or wife _____ File No. _____
 Children 16 or over _____ File No. _____
 Father Terukichi File No. 5000 Mother Nobu File No. 4353
 Name of Original Investigator _____
 Bill received _____ Copy sent to Accounting Department _____
 Bill paid _____ Date paid noted on bill _____
 Name and address of Agent for Custodian _____
 Terms of agency _____
 Name and address of Agent for Japanese _____
 Terms of agency _____

REAL PROPERTY (Real Estate):

Property address _____
 Legal description _____
 Search of Land Registry Office _____
 Search of Judgment Book _____
 Vesting order _____
 Certificate of encumbrance _____
 Tax Statement (and date for pre-payment) _____
 Water and other rates _____
 Encumbrances and particulars of each:
 Mortgage _____
 Agreement for Sale _____
 Liens _____
 Judgments _____
 Notice of Tax Sale _____
 Others _____
 Insurance—full particulars _____
 Leases or rental arrangements—full particulars _____
 Liquidated or otherwise disposed of—full particulars _____
 Summary of Real Property, as at a given date _____

PERSONAL PROPERTY:

Complete inventory showing various kinds of property:
 Stock-in-trade _____
 Equipment _____
 Household goods _____
 Farm implements and tools _____
 Bills receivable and accounts receivable _____
 Choses in action _____
 Interest in an Incorporated Company in any protected area in British Columbia _____
 Fishing vessels sold or undisposed of _____
 Motor vehicles _____
 Cameras _____
 Radios _____
 Firearms _____
IN EACH CASE:
 Confirmation of ownership _____
 Encumbrances _____
 Where located _____
 In whose care and all particulars _____
 Insurance—full particulars _____
 Liquidated or otherwise disposed of _____
 Summary of Personal Property as at a given date _____

LIABILITIES:

Claims (Bills payable and accounts payable)
 Identified _____
 Supported by affidavit _____
 Confirmed _____
 Paid _____
 Dominion Income Tax _____
 Business Tax and Licences _____
 Workmen's Compensation _____
 Summary of Personal Liabilities, as at a given date _____

RECAPITULATION:

Statement of affairs _____

ALL COMMUNICATIONS RESPECTING PATIENTS MUST BE
ADDRESSED TO THE MEDICAL SUPERINTENDENT.
ALL CHECKS, MONEY ORDERS, ETC., TO BE MADE
PAYABLE TO PROVINCIAL MENTAL HOSPITAL.



THE GOVERNMENT OF
THE PROVINCE OF BRITISH COLUMBIA
Provincial Mental Hospital
ESSONDALE, B. C.
CANADA

OFFICE OF THE CURATORIAN
JUDICIAL SECTION

RECEIVED
MAY 20 1942

GSM Form 1

Registered
No. 20/4

May 19th, 1942.

5001

Mr. G. W. McPherson,
Custodian of Japanese Estates,
506 Royal Bank Building,
Vancouver, B.C.

Dear Sir:


Re Satoru Okada #20.151

The above man was admitted to this Institution on
May 2nd, 1942, from Hastings Park Camp. He has a
brother also resident at Hastings Park at the present
time.

I am enclosing you herewith Canadian Bank of Commerce
Chemainus, B.C. Branch Savings Department Bank Book,
Account No. 0-34, property of the above, showing a
balance to his credit at May 8th, 1940, of \$884.63.
I presume as Custodian of Japanese Estates you will
make enquiries into this account.

Would you kindly inform me to whom I am to render
accounts for Japanese residents committed from Hastings
Park.

Respectfully yours,


Gowan S. Macgowan,
BURSAR.

GSM:H
Encl.

26th May, 1942.

Gowan S. Macgowan, Esq.,
DUPONT,
Provincial Mental Hospital,
Essondale, B. C.

Dear Sir:

Re: Satoru Okada

5001
Okada

Thank you very much for your letter dated May 19th regarding the gentleman mentioned above. As Mr. Okada has not registered his assets with us and because he still remains within the protected area the Custodian's office is in no way concerned with this case. We are therefore returning to you the bank book mentioned in your letter and would suggest in this instance that you get in touch with Mr. Okada's brother and deal with the matter in your normal way.

Yours truly,

R. P. Alexander
Assistant Manager

RPA:LF

(Information supplied by Ins. Co.)

LIFE INSURANCE

Name Mr. Satoru Okabe

File No. 5001

Elm Creek Man

Reg. No. 02916

Company Sun Life

Agency Vancouver Agency

Policy No. 2236234

Premium - \$ 25.05

Payable: Annually, Semi-annually or monthly

Month June Day 5

REMARKS:

Letter sent 13/9/43