A IS GIZLOWE

Arthur Maria

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: KISHI. Shunel,	
HOME ADDRESS: Box 180 Stevesten,	그는 그 그는
REGISTRATION NUMBER 05913	: 400kg/12의 교육교통의 전상적에 기념통원 (2mm 1mm) : 10mm = 1. mag (1mm) : 10mm) 하는 10mm (2mm 2mm) 개념원 (2mm) 개념원 (2mm
OCCUPATION: Carpenter,	
(If any business or businesses carried on, state where, upartnership with anyone; if partnership, give partner's no	under what name and whether carried on by yourself or in
EMPLOYER: Self.	
MARRIED? No.	
NAME OF WIFE OR HUSBAND	e frankentonia esta benera instala a contra contra transporta contra con
NAMES OF ANY LIVING CHILDREN:	
ADDRESS OF CHILDREN: AGE OF CHILDREN:	
	ch parcel must be mentioned and particulars given)
2 BUILDINGS AND OTHER IMPROVEMEN	TS:
3. INSURANCE (Give particulars; state where	policies are)
4. TAXES (Amount and where payable)	The state of the s
5. ENCUMBRANCES (Including any unregister	red claims or deposit of title deed)
6. OCCUPANCY AND LEASES (If vacant so	state)
	- paragramment (1871) i mana paragrapi di mana mana mana mana mana mana mana man

8.	STATE IF ANY OTHER PERSON HAS ANY INTEREST
9.	IF FARM LAND STATE CROPS SOWN
T/	TEMENT OF REAL PROPERTY OCCUPIED
1.	LOCATION AND DESCRIPTION: Gannery Cabin, Steveston, B.G.
2.	LANDLORD'S NAME AND ADDRESS: B.C. Packers Ltd. Bencouver. B.C.
3.	PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: None.
eneden a	Lives in Cannery Cabin Rent free:
4.	STATE WHEREABOUTS OF LEASE: None.
5.	SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid)
official re	
6.	ALCONOMICS OF A CONTROL OF A CO
	IF FARM LAND, PARTICULARS OF PROPS SOWN:
	TEMENT OF PERSONAL PROPERTY OWNED:
	GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE FIXTURE
	EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
ekarsika e	
ewant	A STATE OF THE STA
2.	HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS
enanti i i i	
	GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN,
	CLAIM ON ANY SUCH PROPERTY
Office Co.	

DIFORMATION FROM R.C.M.P.

			Date	104.14/13.
our File No	199			
NAME OF THE PROPERTY OF THE PR	KISHI, (sh	Sh unzi irhame in Block Let	tora)	
Registration No.	039/3	Male - Female (check)	Age	Mon. 15: 1915
Fomer Marese	POB	pe/80,	Herman	, Be
Date Evacuated	21/4/42	Naturalize	d - Canadian-Born	- National
resent Address		Taff, B.	e.	
darried . Single (check)		Name of Wife		
Nume of Mother	1 9	Misus Name of Fath	An experience of control extension for the control of the control	ten Gya
Requested by	6(0)) p	Registered of	with Custodian	(Yes/or No)

LIFE INSURANCE

Mame Shunji Kishi

John - BC

File No. 5009

Reg. Mo. , 39/3

Company Mutual Life

Agency

Policy No. 542943

Premium - \$48.31

Payable: Annually, Semi-annually or monthly

Month February Day 8

REMARKS:

feller sent 13/9/13