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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: MORITA, (Pulino) Mrs. Hirokishi.	Communication (communication) bear of the communication of the Communication (communication) and the communication of the communication (communication) and the communication of the communication (communication) and the com
HOME ADDRESS: Sth Ave., & Dyke, P.C.B	ox 401, Steveston, B.C.
REGISTRATION NUMBER 04868 SE	X: Female AGE: 40
OCCUPATION: Housettfe.	
(If any business or businesses carried on, state where, under partnership with anyone; if partnership, give partner's name.	r what name and whether carried on by yourself or in
EMPLOYER: Bone	
MARRIED? Yes	
NAME OF WIFE OR HUSBAND: Hirokicht # 12	regressivenes in derivative and regress to determine the enterprise personal regressive enterprise and the enterprise and the enterprise enterprise and the enterprise enterpris
ADDRESS OF WIFE OR HUSBAND: Same Address	The second second control of the second seco
NAMES OF ANY LIVING CHILDREN. Hirokasu. Robo (7)	보일하다 화가는 가는 얼마나는 아니는 아내는 아내는 아내는 아이들이 아니는 아니는 가게 하고 있는데 가를 가고 있다.
ADDRESS OF CHILDREN: Same Address. AGE OF CHILDREN 17: 15: 14: 12: 9:	
1. LOCATION AND DESCRIPTION: 1000000	parcel must be mentioned and particulars given)
2 BUILDINGS AND OTHER IMPROVEMENTS:	
	none
3. INSURANCE (Give particulars; state where pol	none icies are)
4 TAXES (Amount and where payable)	
5. ENCUMBRANCES (Including any unregistered of	
	saims or deposit of title deed) none
6. OCCUPANCY AND LEASES (If vacant so stat	le)
	And the second s

8.	STATE WHEREABOUTS OF TITLE DOCUMENTS: none STATE IF ANY OTHER PERSON HAS ANY INTEREST: none
	IF FARM LAND STATE CROPS SOWN Bone
ST/	TEMENT OF REAL PROPERTY OCCUPIED
1.	LOCATION AND DESCRIPTION: 6th Ave., & Dyke, P.O. Box 401, Steveston, B.C.
	torey 8-room frame building.
2.	LANDLORD'S NAME AND ADDRESS: Lives with her husband
3.	PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID MONE
4.	STATE WHEREABOUTS OF LEASE: * Bone
5.	SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid) none
i feet an	
erifi, kini	
6.	IF FARM LAND, PARTICULARS OF CROPS SOWN:
	TEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
Shirthy Shirthy	
GENERAL AND	
eren o	
times in	
2.	HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS
francy,	
Staff !	GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN A
3.	THE REPORT OF THE PARTY OF THE
	CLAIM ON ANY SUCH PROPERTY
3	
3	

	INFORMATION FROM R.O.M.		<u>w24/43.</u>
ur File No. <u>50/7</u> ull Name <u>MORL</u>	(Surname M Mock	Mrs. H	lizokichi
ngistration No0494			. <u>Mm.13.1911</u>
Former Mdress	1. Boc 411,	Shoute	- 18·P.
Date Evacuated Apr.		alized - Canadian- (check)	
Present Address	arnoual,	Dearborn Man	
Married - Single (oneck)	Name o		indich # 041
Name of Mother Names of Children under		Lusband's	, lee 1
Requested by		stered with Custod	
Additional Information			