

5020

**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: SHIRAKAWA, KoichiHOME ADDRESS: 102 Moncton St., Steveston, B. C. (Box 79)REGISTRATION NUMBER 14330 SEX: Male AGE: 16OCCUPATION: Student

(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: noneMARRIED? noNAME OF WIFE OR HUSBAND: noneADDRESS OF WIFE OR HUSBAND: noneNAMES OF ANY LIVING CHILDREN: noneADDRESS OF CHILDREN: noneAGE OF CHILDREN: none**STATEMENT OF ALL REAL PROPERTY** (Each parcel must be mentioned and particulars given)1. LOCATION AND DESCRIPTION: none2. BUILDINGS AND OTHER IMPROVEMENTS: none3. INSURANCE (Give particulars; state where policies are) none4. TAXES (Amount and where payable) none

5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed)

none6. OCCUPANCY AND LEASES (If vacant so state) 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

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: 5 room 2 storey frame house at
102 Moncton St., Steveston, B. C.
2. LANDLORD'S NAME AND ADDRESS: Mrs. T. Uyeda, 102 Moncton St.,
Steveston, B. C.
3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:
No rent.
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, FIXTURES,
EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
School books and personal effects in owner's possession at
102 Moncton St., Steveston, B. C.
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) 3--\$4.00 War Savings Certificates in owner's possession.

8. BANK ACCOUNTS: none

9. LIFE INSURANCE: none

10. INTEREST IN ANY ESTATES OR TRUSTS: none

11. SAFETY DEPOSIT BOX: none

LIABILITIES:

1. PERSONAL DEBTS: none

2. TRADE DEBTS: none

REMARKS: Personal effects and school books will be taken with declarant when he is evacuated.

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 16th day of April 1942.

[Signature]
Witness

(Signature) *Koichi Shiratsuna*

FOR DEPARTMENTAL USE _____

INFORMATION FROM R.C.M.P.

Date Nov. 25/43

Our File No. 5020

Full Name SHIRAKAWA Kaichi
(Surname in Block Letters)

Registration No. 14330

Male - Female
(check)

Age June 18, 1921

Former Address Box 79,

Date Evicted Apr. 22/42 Naturalized - Canadian-Born - National
(check)

Present Address Lethbridge, Alta.

Married - Single
(check)

Name of Wife -

Name of Husband -

Name of Mother ^{nee} (TAKAI) Takahashi Name of Father Kuichi # 10222

Names of Children under 16 (None)

Requested by ECP Registered with Custodian (Yes or No)

Additional Information Student