BENTAL STATEMENT

PORM **49**

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.

| PERSONA | L INFORMATION |
|-----------|--|
| NAME: | OHORIA Chikako Mery |
| HOME AD | DRESS: Scott Rd., R.R. No.1, New W stminster, BC |
| REGISTR/ | ATION NUMBER 12505 SEX: Female AGE: 18 |
| OCCUPAT | ION: Unemployed |
| 100 L | |
| (If any b | ousiness or businesses carried on, state where, under what name and whether carried on by yourself or is with anyone; if partnership, give partner's name.) |
| EMPLOYE | |
| MARRIED |)? |
| NAME OF | WIFE OR HUSBAND: |
| ADDRESS | OF WIFE OR HUSBAND: |
| NAMES O | F ANY LIVING CHILDREN: |
| | / >/ |
| | $/\sim 1$ |
| ADDDESS | OF CHILDREN: |
| | HILDREN: |
| | |
| 1. LOCA | TION AND DESCRIPTION: |
| | |
| | |
| 2 RIIII | DINGS AND OTHER IMPROVEMENTS: |
| | |
| | / Y / |
| | |
| | |
| 3, INSU | RANCE (Give particulars; state where policies are) |
| | |
| | ES (Amount and where payable) |
| 5. ENC | JMBRANCES (Including any unregistered claims or deposit of title deed) |
| | |
| | |
| 6. OCCI | JPANCY AND LEASES (If vacant so state) |
| | |
| | The state of the s |

| | STATE WHEREABOUTS OF TITLE DOCUMENTS: None |
|----------------------------|---|
| 8. | STATE IF ANY OTHER PERSON HAS ANY INTEREST: None |
| 9. | IF FARM LAND STATE CROPS SOWN None |
| | |
| No. of Process | |
| STA | TEMENT OF REAL PROPERTY OCCUPIED |
| 1, | LOCATION AND DESCRIPTION: Nine-room frame dwelling house at 436 |
| R. | E. No.l. New Westminster, B.C. |
| 2. | LANDLORD'S NAME AND ADDRESS: Ny father |
| 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: Note |
| | |
| 1 | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: |
| 1 | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE |
| 1 | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: |
| | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: |
| | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: |
| 15 | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: |
| L. | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS. None |
| | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS. None |
| L. | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS. None |
| 1, sections sections 2. | ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS. None |

| ORW | |
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| 4. | INSURANCE CARRIED ON ABOVE PROPERTY: "ODE |
| 5. | MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION O |
| | OTHERS: None |
| | |
| 6. | MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) |
| | |
| | |
| 7. | BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabout |
| | two-35 War Savings Certificates |
| 8. | BANK ACCOUNTS: None |
| 9. | LIFE INSURANCE: \$ 25¢ per week straight life insurance in the |
| | Prudential Life Ins. Co. Beneficiary my father. Policy at ho |
| | INTEREST IN ANY ESTATES OR TRUSTS. None |
| | |
| 11. | SAFETY DEPOSIT BOX: None |
| LI | MBILITIES . |
| 1. | PERSONAL DEBTS: None |
| | |
| | |
| 2. | TRADE DEBTS: None |
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| | I, the undersigned, hereby voluntarily turn over to the Custodian all my property in the prote as set out above, excepting fishing vessels, deposits of money, shares of stock, debentures, be other securities, if any. |
| evi | I certify that the above information is true and complete and fully discloses all my property ery description in any protected area in British Columbia and sets forth all my liabilities di d indirect. |
| | Dated this 18th day of April 1942. |
| | (Signature) Chikako Franzis |
| | Witness |
| | OR DEPARTMENTAL USE |

INFORMATION FROM R.C.M.P. our File No. 5/49 Male - Female (check) Registration No. 12506 Former Address Scott Rd RR#1 Men & Date Descusted (Cps. 27//2 Naturalized - Canadian-Born - National (check) Present Address Married - Single . Name of Wife___ (check) Name of Husband brakyame of Father Marate #12494 -Names of Children under 16 Registered with Custodian Requested by (Yes or No) Additional Information __