THE MANY THE RESIDENCE OF THE

STRAWBERRY HILL

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.

AME:	
	KANADA Naojiro
OME ADDRES	R.R.#1 New Westminster, B. C. (Bailey Rd)
ECISTRATION	NUMBER 12486 SEX: M AGE:
	Retired
(If any business	s or businesses carried on, state where, under what name and whether carried on by yourself or in nyone; if partnership, give partner's name.)
EMPLOYER:	
MARRIED?	부분에 가지를 가입하면 보면 보면 보다 보는 사람들이 되었다. 그는
name of Wif	TE OR HUSBAND: Masu
ADDRESS OF	WIFE OR HUSBAND: R.R.#1 New Westminster, B.C. (Beiley Rd.
NAMES OF AL	VY LIVING CHILDREN: Masae (F)
	CHILDREN: R.R.#1 New Westminster, B.C.
ADDRESS OF	CHILDREN:
AGE OF CHIL	DREN: 15 yrs.
	OF ALL REAL PROPERTY (Each parcel must be mentioned and particulars given) None None
	NGS AND OTHER IMPROVEMENTS:
	NGS AND OTHER IMPROVEMENTS:
	NGS AND OTHER IMPROVEMENTS:
2. BUILDII	NGS AND OTHER IMPROVEMENTS:
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3. INSUR	ANCE (Give particulars; state where policies are)
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3. INSUR	NGS AND OTHER IMPROVEMENTS: ANCE (Give particulars; state where policies are)
3. INSURA	ANCE (Give particulars; state where policies are) (Amount and where payable) MBRANCES (Including any unregistered claims or deposit of title deed)
2. BUILDII 3. INSUR 4. TAXES 5. ENCUR	ANCE (Give particulars; state where policies are) (Amount and where payable) MBRANCES (Including any unregistered claims or deposit of title deed)
2. BUILDII 3. INSUR 4. TAXES 5. ENCUR	ANCE (Give particulars; state where policies are) (Amount and where payable) MBRANCES (Including any unregistered claims or deposit of title deed)

	EREABOUTS OF TITLE DOCUMENTS:
8 STATE IF A	NY OTHER PERSON HAS ANY INTEREST:
	AND STATE CROPS SOWN
	REAL PROPERTY OCCUPIED
	AND DESCRIPTION: R. R. #1 New Westminster, B. C. Bailer
	woo den frame bungalow.
2. LANDLORD	'S NAME AND ADDRESS: SonTomizo, same address
3. PARTICULA	ARS OF LEASE AND RENT AND DATE TO WHICH PAID. None
4. STATE WH	EREABOUTS OF LEASE: None
5. SUB-TENAN	NTS, IF ANY (Give name, address, rent and to what date paid) None
6. IF FARM L	AND, PARTICULARS OF CROPS SOWN: None
STATEMENT O	F PERSONAL PROPERTY OWNED: OF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE MENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
	None
EQUIP	
EQUIP	IVESTOCK AND OTHER ANIMALS, POULTRY AND PETS
EQUIP	
EQUIP	

		ILE No	MEDPRESIDE
INSURANCE CARRIED ON AB	BOVE PROPERTY: None		
	OTHER CLAIMS ON PROPERTY I	N POSSESSION	OF
OTHERS:			
	tate if any of these debts assigned and if s	o, to whom)	
	None		
BONDS, DEBENTURES, SHAR	RES, STOCKS OR OTHER SECURITIE	S (State whereab	outs)
	None		
		00 Benefici	
wife Masu Policy	Life Insurance Co. \$1000. at home		
D. INTEREST IN ANY ESTATES	OR TRUSTS. None		
, SAFETY DEPOSIT BOX:	Monde response and property and another expenses to the contract of the contra	and the second second second second	
IABILITIES:			
I. PERSONAL DEBTS:	No ne)	
2 TRADE DEBTS:	None		
			-1
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INFORMATION FROM R.C.M.P.

	Date //m 30//3
our File No. 5/6/ Full Name XAMADA, (Sur	mame in Mook Letters)
Registration No. /2486	Mele - Female Age Gen. 2/872 (check)
Former Address RR#	1. Mew 2het, N.C.
	Naturalized - Canadian-Born - National (check)
Present Address_	id July 20/42 J. C.
Sarried - Single	Name of Wife (SHIGH) Main
Name of Mother TAMAKI) Names of Children under 16	
Requested by BC/	Registered with Custodian (Yes or No.)
Additional Information	Retril