

5386

MISSION

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: IMAKIBE (Tomiko Lillian) Mrs. AkiraHOME ADDRESS: P.O. Box 197, Mission City, BCREGISTRATION NUMBER 13522 SEX: Female AGE: 28OCCUPATION: Housewife

(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: - 00MARRIED? YesNAME OF WIFE OR HUSBAND: AkiraADDRESS OF WIFE OR HUSBAND: P.O. Box 197, Mission, BCNAMES OF ANY LIVING CHILDREN: Yuriko (F) Tokiaki (M) Kenji (M)ADDRESS OF CHILDREN: P.O. Box 197, Mission, BCAGE OF CHILDREN: 8, 6, 2

STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned and particulars given)

1. LOCATION AND DESCRIPTION: None /2. BUILDINGS AND OTHER IMPROVEMENTS: /3. INSURANCE (Give particulars; state where policies are) /

4. TAXES (Amount and where payable)

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

6. OCCUPANCY AND LEASES (If vacant so state)

7. STATE WHEREABOUTS OF TITLE DOCUMENTS: _____

8. STATE IF ANY OTHER PERSON HAS ANY INTEREST: _____

9. IF FARM LAND STATE CROPS SOWN 000 _____

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: Six-room dwelling on Mandale Rd.,

Mission, BC

2. LANDLORD'S NAME AND ADDRESS: My 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: 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: _____

None

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) None
8. BANK ACCOUNTS: None
9. LIFE INSURANCE: \$500 in Prudential Life Ins. Co. Beneficiary my husband, Policy No. 412917712 in my possession
10. INTEREST IN ANY ESTATES OR TRUSTS. None
11. SAFETY DEPOSIT BOX: None

LIABILITIES:

1. PERSONAL DEBTS: None
2. TRADE DEBTS: None

I, the undersigned, hereby voluntarily turn over to the Custodian all my property in the protected area as set out above, excepting fishing vessels, deposits of money, shares of stock, debentures, bonds or other securities, if any.

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 21st day of April 1942.

(Signature) Tomato L. Smakire

W. Williams
Witness

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

Date Oct. 18/43

Our File No. 5386

Full Name IMAKIRE (Tamiko Lillian) Mrs. Akira
(Surname in Block Letters)

Registration No. 13522 Male - Female (check) Age July 27, 1914

Former Address P. O. Box 197, Mission City, B.C.

Date Evacuated May 3/42 (P) Naturalized - Canadian-Born - National (check)

Present Address Tashme, B.C.

Married - Single (check)

Name of Wife -

Name of Husband Akira #13519

Name of Mother (MAKINO) ^{nee} Asa Name of Father AMEMORI, Tadao

Names of Children under 16 #13659 #13516

See husband's sheet.

Requested by [Signature] Registered with Custodian _____ (Yes or No)

Additional Information _____

STATEMENT OF ASSETSCustodian's OfficeBritish Columbia Security Commission.File No.: 5386Name: IMAKIRE, TomikoReg. No. 13522Address: TASHME

Special Enquiry: _____

Credit with Custodian: NILCredit in Bank: NILLife Insurance: \$500.00 Prudential Life Beneficiary HusbandReal Property: NIL

Net Revenue

Negotiable Assets: NIL

Remarks: _____

Date: May 19, 1944.

Compiled by:

Harker

Claim cancelled by
Mr. Shimokura. Feb 10/44
see letter - File 12814

C L A I M

File No.

5286?

DATE

Oct. 3, 1942.

CREDITOR

Mitsugi Harold Shimokura

DEBTOR

Mrs. Imagire
Mission, B.C.

AMOUNT OWING

\$105.00

AGENT

ORIGINAL FILE

12814

Withdrawn

Dec. 30, 1942.

B.T.

E. Bridson

GENERAL SUMMARY

File No. 5386

Re: IMAKIRE, Tomiko Lillian (Mrs. Akira)

Reg. No. 13522

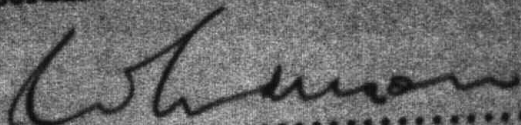
The above Japanese declared no assets except for a \$500.00 Prudential Life Insurance policy which was not brought under control by the Custodian.

This file reveals no other assets.

The above Japanese declared no liabilities. On October 3, 1942 Mitsugi Harold SHIMOKURA filed one against her for \$105.00 but withdrew it in his letter of February 10, 1944 on his file #12814.

This file reveals no other liabilities, and no further administration is required.

The above summary is certified to be in accordance with the information on file.



WEA:EH

April 25, 1946