

5540

**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 INFORMATIONNAME: **HISACKA (Kin) Mrs. Ichirohe**HOME ADDRESS: **Dewdney Trunk Rd., R.R. No. 1. Mission, B.C.**REGISTRATION NUMBER **13059** SEX: **Female** AGE: **48**OCCUPATION: **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: **---**MARRIED? **Yes**NAME OF WIFE OR HUSBAND: **Ichirohe**ADDRESS OF WIFE OR HUSBAND **Dewdney Trunk Rd., R.R. No. 1. Mission, BC**NAMES OF ANY LIVING CHILDREN: **Jiro (M) Haruo (M) Michie (F)**ADDRESS OF CHILDREN **Dewdney Trunk Rd., R.R. No. 1. Mission, BC**AGE OF CHILDREN: **14, 11, 9****STATEMENT OF ALL REAL PROPERTY** (Each parcel must be mentioned and particulars given)1. LOCATION AND DESCRIPTION: **None**2. BUILDINGS AND OTHER IMPROVEMENTS: **None**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: None
8. STATE IF ANY OTHER PERSON HAS ANY INTEREST: ---
9. IF FARM LAND STATE CROPS SOWN ---

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: Seven-room frame dwelling at Dawdney Trunk Rd.
R.R. No. 1. Mission, B.C.
2. LANDLORD'S NAME AND ADDRESS: My husband
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: None5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF
OTHERS: None6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) None7. BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabouts)
None8. BANK ACCOUNTS: None9. LIFE INSURANCE: \$1000 in the Sun Life Assur. Co. 20-year endowment.Policy No. 2190035 in owner's possession. Beneficiary my husband Ichirohe
\$2500 in Family Beneficiary Society. HISACKA10. INTEREST IN ANY ESTATES OR TRUSTS: None11. SAFETY DEPOSIT BOX: None

LIABILITIES:

1. PERSONAL DEBTS: None2. 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 17th day of April 1942.

(Signature)

Kim. HisackaT. J. T. Williams
Witness

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

Date Aug 10/43

Our File No. 5540

Full Name HISAKA (Kin) Mrs. Ichirohe
(Surname in Block Letters)

Registration No. 13059

Male - Female
(check)

Age Oct. 23, 1893

Former Address Mission, B.C. R.R#1.

Date Evacuated Apr. 24/42. Naturalized - Canadian-Born - National
(check)

Present Address Lethbridge, Alta.

Married - Single
(check)

Name of Wife -

Name of Husband Ichirohe #13057

Name of Mother (EWAIRARA) nee Name of Father HIRASHIMA Torakichi
(check)

Names of Children under 16 (dead) (dead)

See husband's sheet

Requested by Violet Scott Registered with Custodian
(Yes or No)

Additional Information _____

4461 & 5540

15th October, 1946.

Mr. Ichiroh HISAOKA
Registration No. 13057,
Iron Springs, Alta.

Dear Sir:

Re: Sun Life Policy No. 2190034- Mrs. Kin HISAOKA

We wish to acknowledge your letter of the 8th October, enclosing cheque in the amount of \$19.39, to cover the amount needed to make up premium owing on your wife's insurance policy.

We have today paid the Sun Life Assurance Company the sum of \$30.00 in full payment of this premium, and for your information have enclosed herewith a copy of our letter to the Insurance Company.

Yours truly,

W.E. Anderson,
Office of the Custodian.

WHA:HA
Encl.

4461 & 5520

15th October, 1946.

Sun Life Assurance Company of Canada,
Royal Bank Building,
675 West Hastings Street,
Vancouver, B.C.

Dear Sirs:

Re: Policy No. 2190035 - Mrs. Kim HIRAKA

We enclose herewith Custodian cheque in the amount of
\$30.00 being premium due 1st October, 1946, on Policy No. 2190035
belonging to the above Japanese.

Kindly acknowledge receipt in due course.

Yours truly,

W.E. Anderson,
Office of the Custodian.

WEA:HA
Encl. (Cheque)

4461
5540

January 29, 1945.

Mr. Ichirohe HISAOKA,
Registration No. 13057,
IRON SPRINGS, Alberta.

Dear Sir:

Re: Family Beneficiary Society

As requested in your letter of January 25th we wish to advise that we have paid the sum of \$50.00 to the above Society, being \$25.00 on your certificate and \$25.00 on your wife's certificate. The amount of \$50.00 has been charged to your account with the Custodian.

For your information we are attaching hereto a copy of our letter of today's date to the Family Beneficiary Society.

Yours truly,

S. M. Gibson,
Insurance Department

SMG:JS

Attach.

File No. 5540

December 2nd, 1944

CLAIMS DEPARTMENT

Kim KISACKA (Mrs. Ichirobe) - Reg. No. 13059

CREDITORS:-

NO CLAIMS ON FILE.

/SD