

5739



**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: KUSANO (Shimaye) Mrs. Kyujiro

HOME ADDRESS: R. R. #1. Port Hammond, B. C. (Powerline Rd.)

REGISTRATION NUMBER 14049 SEX: female AGE: 57

OCCUPATION: housewife, farmer's help

(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: husband

MARRIED? yes

NAME OF WIFE OR HUSBAND: Kyujiro

ADDRESS OF WIFE OR HUSBAND: same

NAMES OF ANY LIVING CHILDREN: all over 16

ADDRESS OF CHILDREN: ---

AGE OF CHILDREN: ---

**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: 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: R.R.#1, Port Hammond, B.C. (Powerline Rd.)  
8 roomed 2 storeyed wooden frame dwelling.
2. LANDLORD'S NAME AND ADDRESS: husband--same address.
3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: rent free
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)  
none  
/8. BANK ACCOUNTS: none9. LIFE INSURANCE: The Family Beneficiary Society, Vancouver Branch.#A.3016 \$2500.00 Beneficiary--son, Hisao KUSANO Policy in Bank of  
Montreal, Haney, B.C.10. 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 25th day of April 1942.(Signature) S. KusanoJ. T. Williams  
Witness

FOR DEPARTMENTAL USE \_\_\_\_\_



INFORMATION FROM R.C.M.P.

Date Nov 8/42

Our File No. 5739

Full Name KUSANO, (Shimaye) Mrs. Kyujiro  
(Surname in Block Letters)

Registration No. 14048

Male - Female  
(check)

Age Apr. 8, 1885

Former Address R.R. #1, Port. Hammond, B.C.

Date Evacuated May 19/42 Naturalized - Canadian-Born - National  
(check)

Present Address % C. Schindler  
Glens, Man.

Married - Single  
(check)

Name of Wife -

Name of Husband Kyujiro #14050

Name of Mother <sup>nee</sup> TAKESHITA Misa Name of Father GYOTOKU, Eikichi

Names of Children under 16 (dead) (dead)  
See husband's sheet.

Requested by PCY Registered with Custodian (Yes or No)

Additional Information



GENERAL SUMMARY

File No. 5739

16th November, 1945

Re: KUSANO, Shimaye (Mrs. Kyujiro)  
Reg. No. 14049

This file reveals no liabilities and the only asset appears to be a Family Beneficiary Society Insurance policy for \$2500.00 which was not brought under control by nor was it administered by the Custodian.

This file can therefore be closed.

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

Dated: Nov. 16, 1945  
WEA:EH

