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HAIMOND 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.

RSONAL INFORMATION	
ME: ARTHORU, Ken.J.	
R.R. No.1. Port Hemmond, BC	
GISTRATION NUMBER 14359 SEX: Male AGE:	
Milhand	
(If any business or businesses carried on, state where, under what name and whether carried artnership with anyone; if partnership, give partner's name.)	
Harmond Cadar Go.	
(ARRIED?NO	
ADDRESS OF WIFE OR HUSBAND:	
NAMES OF ANY LIVING CHILDREN:	
	대 그런데, 보급시 하인 첫째 시간 회사에 되었다고 있다.
ADDRESS OF CHILDREN:	
AGE OF CHILDREN:	nd particulars given
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STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned at Location and Description: None 2. Buildings and other improvements: None	nd particulars given
STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned a 1. LOCATION AND DESCRIPTION: None 2. BUILDINGS AND OTHER IMPROVEMENTS: None 3. INSURANCE (Give particulars; state where policies are)	nd particulars given
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STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned a 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)	nd particulars given
STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned a 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) ====================================	deed)
STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned a 1. LOCATION AND DESCRIPTION: 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)

	STATE WHEREABOUTS OF TITLE DOCUMENTS: None
	STATE IF ANY OTHER PERSON HAS ANY INTEREST: NOTE
9.	IF FARM LAND STATE CROPS SOWN None
	TEMENT OF REAL PROPERTY OCCUPIED
1,	LOCATION AND DESCRIPTION: I live with my parents
2.	LANDLORD'S NAME AND ADDRESS: None
3.	PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:
	STATE WHEREABOUTS OF LEASE:
5 .	SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid)
6.	IF FARM LAND, PARTICULARS OF CROPS SOWN:
essent.	
- ST 1.	ATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURE EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
	Nova
politica (
	HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS None
	HORSES, LIVESTOCK AND OTHER ANIMALS, TOUTH, 1990
	3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, CLAIM ON ANY SUCH PROPERTY

INSURANCE CARRIED ON ABOVE PROPERTY:	News .	
MORTGAGES, LIENS AND OTHER CLAIMS OTHERS: None		
MONEYS OWING TO YOU (State if any of these d	lebts assigned and if so, to whom)Non	
BONDS, DEBENTURES, SHARES, STOCKS OR		
BANK ACCOUNTED INCOME.		100
LIFE INSURANCE: \$1000 Sun Life Ins		7
Beneficiary my father. Policy at	None	
). INTEREST IN ANY ESTATES OR TRUSTS		
I. SAFETY DEPOSIT BOX: None		
IABILITIES: None		
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INFORMATION FROM R.C.M.P.

			Date (119.11/13.
Our File No	[[] [[[스) [[[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [[20] [
Full Name	ARINABIL	Kenji name in Block Lett	
		ame in Block Lett	ters)
Registration No	. 14359	Male - Female (check)	Age Man.9/1922
Former Address	R.R#1,	Port Han	mmel, k.P.
Date Evacuated_	2/6/42	Naturalized	- Canadian-Born - National (check)
Present Address	<u> Min</u>	mipey ? Lu	gely & Fuel,
Married - Single (check)		Name of Wife	
Name of Mother	SUTSUI) Sh	Name of Husb Name of Fath	er Manys # 13956 159
lames of Childre	en under 16	*1404?	
equested by	Toka 4. Scots	Registered	with Custodian (Yes or No)
dditional Infor	metion Mil	Uland.	