

5839

Form 141

FILE NO. \_\_\_\_\_

### Mission OFFICE OF THE CUSTODIAN JAPANESE SECTION

To be completed by persons of the Japanese race having no property in any protected area.

NAME: SHIKAZE Emiko

HOME ADDRESS: P.O. Box 312, Mission, B. C. REGISTRATION No. 13214

SEX: Female AGE: 17 MARRIED? no

OCCUPATION AND EMPLOYER: Student, none ADDRESS: \_\_\_\_\_

NAME OF WIFE OR HUSBAND: --- ADDRESS: \_\_\_\_\_

NAMES OF LIVING CHILDREN: --- ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

I certify that the above information is true and complete and state that I have no property of any kind whatsoever in any protected area in British Columbia.

Dated this 21st day of April 1942.

WITNESS: [Signature]

(Signature) Emiko Shikaze

**LIST OF LIABILITIES:**

**None**

**HOW DO YOU PROPOSE TO PAY THESE OFF?**

**FOR DEPARTMENTAL USE**

INFORMATION FROM R.C.M.P.

Date Oct. 13/43.

Our File No. 5139

Full Name SHINAZE, Emiko  
(Surname in Block Letters)

Registration No. 13214

Male - Female  
(check)

Age Mar. 15, 1924

Former Address P.O. Box 312, Mission, B.C.

Date Evacuated May 2/42 Naturalized - Canadian-Born - National  
(check)

Present Address Lethbridge, Alta.

Married - Single  
(check)

Name of Wife —

Name of Husband —

Name of Mother (NISHIO) Eda #14461 Name of Father Kayemon #14462

Names of Children under 16 —

Requested by OP Registered with Custodian —  
(Yes or No)

Additional Information Student