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Steveston, B. C.

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: HASHINOTO, Isamu
HOME ADDRESS: House #16, Gulf of Georgia Cannery, Steveston, B.
REGISTRATION NUMBER Q5627 SEX: Male AGE: 17
OCCUPATION: Student
(If any business or businesses carried on, state where, under what name and whether carried on by yourself or is partnership with anyone; if partnership, give partner's name.)
EMPLOYER: none*
MARRIED? no
NAME OF WIFE OR HUSBAND: none
ADDRESS OF WIFE OR HUSBAND: none
NAMES OF ANY LIVING CHILDREN: none
ADDRESS OF CHILDREN: none
AGE OF CHILDREN: none
1. LOCATION AND DESCRIPTION: none 2. BUILDINGS AND OTHER IMPROVEMENTS: none
3. INSURANCE (Give particulars; state where policies are) none
4. TAXES (Amount and where payable) none
5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed)
none
6. OCCUPANCY AND LEASES (If vacant so state) none

900	CITYIM ON YAX SACH PROPERTY.
HVAING VNA INLEREEL IN' C	3 CIAE THE NAME AND ADDRESS OF ANY PERSON
	auou
LBY AND PETS	2. HORSES, LIVESTOCK AND OTHER ANIMALS, POULT
	- auou
E VAD PERSONAL EFFECTS:	TATEMENT OF PERSONAL PROPERTY OWNED: GIVE BRIEF DESCRIPTION AND STATE LOCATIO EQUIPMENT AND MACHINERY, STOCK IN TRAD
euou	IF PARM LAND, PARTICULARS OF CROPS SOWN:
	auou
what date paid)	STATE WHEREABOUTS OF LEASE: none to SUB-TENANTS, IF ANY (Give name, address, rent and to
нісн ьуір:	PARTICULARS OF LEASE AND RENT AND DATE TO W
	LANDLORD'S NAME AND ADDRESS: Lives with
	LOCATION AND DESCRIPTION: 6 room frame
	VLEWENT OF REAL PROPERTY OCCUPIED
	IE EARM LAND STATE CROPS SOWN none
	STATE IF ANY OTHER PERSON HAS ANY INTEREST:
	STATE WHEREABOUTS OF TITLE DOCUMENTS:

		FILE NO.
4.	INSURANCE CARRIED ON ABOVE 1	PROPERTY: none
5.	MORTGAGES, LIENS AND OTHER OTHERS: none	CLAIMS ON PROPERTY IN POSSESSION OF
6.	MONEYS OWING TO YOU (State if a	nny of these debts assigned and if so, to whom)
7.		OCKS OR OTHER SECURITIES (State whereabouts)
9.	BANK ACCOUNTS: LIFE INSURANCE: Sun Life.	none \$2,000.00. Policy No. 2188442. Hashimoto. Policy in owner's possessi
JA.	SAFETY DEPOSIT BOX:	none
2	TRADE DEBTS:	none
eve	I, the undersigned hereby voluntarily to as set out above, excepting fishing vessother securities, if any. I certify that the above information is to ry description in any protected area in B indirect.	urn over to the Custodian all my property in the protected els, deposits of money, shares of stock, debentures, bonds rue and complete and fully discloses all my property of ritish Columbia and sets forth all my liabilities direct
0	Witness R DEPARTMENTAL USE	

	INFORMATION FROM R.C.M.P. Date - July 23/1/3.
Our File No. 64	155
Full Name	(Surplame in Block Letters)
Registration No	05727 Mele - Female (oheck) Age <u>Aug.15,1824</u>
Former Address	P.O. Bene 419 Steventon, N.C.
Date Evacuated	2//s//2 Naturalized - Canadian-Born - National (check)
Present Address	Bridge River, A.C.
Married - Single (check)	Name of Wife
Name of Mother (Name of Husband (SHOII) Moto Name of Father Kunamasuke #6339 under 16
Requested by	Marvel Registered with Custodian (Yes or No)
Additional Infor	mation <u>Atualen</u>

February 18, 1946.

FILE NO. 6455

PERSONAL PROPERTY SUMMARY

Re: Isamu HASHIMOTO Registration No. 05627

The above named Japanese certified in his declaration of April 28, 1942, that he had a Sun Life Assurance Policy No. 2188442 in the amount of \$2,000.00 in his possession.

As the above did not come under the control of the Custodian no action was taken.

There are no specified articles of any kind revealed on the file.

No property interests other than those mentioned are found on the file.

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

George Peters

Administration Department

February 18, 1946.

MARYLTTE SONGEL

Res 122mo HASSISSUE Registration Ro. 05627.

There are no claims against the above -Pressure prevented on this Piles.

The above numery is cortified to be in accordance with the informa-tion on file,

Administration Department