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FORM "JP" BUREAU HASTINGS PARK FILE No. 6500

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: MASUDA, Mineo

HOME ADDRESS: Shawnigan Lake, B. C.

REGISTRATION NUMBER 15499 SEX: male AGE: 16

OCCUPATION: Millhand.

(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: Shawnigan Lake Lumber Co.

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

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) 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

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: Shawnigan Lake Lumber Co. five room bungalowframe building

2. LANDLORD'S NAME AND ADDRESS: Shawnigan Lake Lumber Co. Shawnigan Lake, B. C.

3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: None Lives with his father.

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

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4. INSURANCE CARRIED ON ABOVE PROPERTY: None

5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF OTHERS: None

6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) None

7. BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabouts)
(2) $5.00 War Saving Certificates. In owners possession.

8. BANK ACCOUNTS: None

9. LIFE INSURANCE: None

10. INTEREST IN ANY ESTATES OR TRUSTS. None

11. SAFETY DEPOSIT BOX: None

LIABILITIES:

1. PERSONAL DEBTS: None

2. TRADE DEBTS: None

REMARKS: NONE

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 28th. day of April 1942.

(Signature) M Masuda

Witness: O. Broadbent

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

Date Nov. 18/43.

Our File No. 6500

Full Name MASUDA, Minee
(Surname in Block Letters)

Registration No. 15499 Male - Female (check) Age Feb. 26, 1926

Former Address Shawnigan Lake, BC.

Date Evacuated May 5/42 Naturalized - Canadian-Born - National (check)

Present Address Lethbridge, Alta.

Married - Single (check) ✓

Name of Wife —

Name of Husband —

Name of Mother MASUDA, Kaura. #08899 Name of Father Iwao #08898

Names of Children under 16

Requested by [illegible] Registered with Custodian Yes (Yes or No)

Additional Information Millland