BUREAU POWELL STREET 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 Informa	NIIVA	College State State of			
NAME: KITAMURA H	ideo George				
HOME ADDRESS:	475 Powel 1 St	Vancouver, B.	C		
REGISTRATION NUM	BER 00421	SEX:	Male	AGE:	16
OCCUPATION :None					
(If any business or business or businesship with anyone;	inesses carried on, state if partnership, give part	where, under what ner's name.)	name and w	rhether carried on	by yourself or i
EMPLOYER: Nor	.				
MARRIED? No.					
NAME OF WIFE OR I	HUSBAND: No.10				
ADDRESS OF WIFE	OR HUSBAND:	lone			
NAMES OF ANY LIV	ING CHILDREN	lon e			
ADDRESS OF CHILD	REN: None				
Charles of the design of the con-					
		TY (Each parce	l must be n	nentioned and p	articulars giver
STATEMENT OF AL				nentioned and p	
STATEMENT OF AL 1. LOCATION AND	L REAL PROPER	None			
	L REAL PROPER DESCRIPTION:	None	<u>/ </u>		
STATEMENT OF AL 1. LOCATION AND	L REAL PROPER DESCRIPTION:	None	<u>/ </u>		
STATEMENT OF AL 1. LOCATION AND	L REAL PROPER DESCRIPTION:	VEMENTS:	None	/	
2 BUILDINGS AN 3 INSURANCE (G	D OTHER IMPROV	VEMENTS:	/ None	/	
2. BUILDINGS AN 3. INSURANCE (G	D OTHER IMPROV	VEMENTS:	/ None	cae i	

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
 ST/	TEMENT OF REAL PROPERTY OCCUPIED
1.	LOCATION AND DESCRIPTION: Located at 473 Powell St., Vancouver, B. C.
2.	LANDLORD'S NAME AND ADDRESS: Living with family
3.	PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: Nome
4.	STATE WHEREABOUTS OF LEASE: None
5.	SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid) None
	D. C.
6.	IF FARM LAND, PARTICULARS OF CROPS SOWN: None
	TEMENT OF PERSONAL PROPERTY OWNED: 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

100.11 (2.04%)

INFORMATION FROM R.C.M.P.

	Date
Our File No. 75	
Full Name	KITAMURA - Kides Sleage. (Surname in Block Letters)
Registration No.	0042/ Male - Female . Age /3-/2-25 (oheck)
Former Address	473 Procest: Vanc. 18.6
Date Evacuated	1/6/42 Naturalized - Canadian-Born - National (check)
Present Address	Bridge Revier BG.
Married - Single (check)	Name of Wife
nee	Name of Husband
Name of Mother H.B.	19841 Jamis Name of Father Labergo -00205
Names of Children u	nder 16
Requested by	Registered with Custodian (Yes or No)
Additional Informat	

March 20th, 1944.

Mr. Rideo KITAMURA,
Registration No. 00421,
Bridge River, B. C.

H. KITAMURA

AMCA:ND Form 137