MERCHINE.

## 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 INFORMATIO   | N   |                          |              |                 |                  |
|---|---|--------------------------|--------------|-----------------|------------------|
| NAME: KAWANOT   | O, Suyeo  |                          |              |                 |                  |
| HOME ADDRESS: R.  | R. No.1, Han  | ey, BC                   |              |                 |                  |
| REGISTRATION NUMBER   | 10859   | SEX:                     | Male         | AGE:            | 81               |
| OCCUPATION: F   | Principal Control of the Control of |                          |              |                 |                  |
| (If any business or businesses partnership with anyone; if part | carried on, state when  | re, under what is name.) | name and whe | ther carried or | by yourself or i |
| EMPLOYER: MY  | self  |                          |              |                 |                  |
| MARRIED?  |   |                          |              |                 |                  |
| NAME OF WIFE OR HUST  | BAND: -   |                          |              |                 |                  |
| ADDRESS OF WIFE OR H  | USBAND:   |                          |              |                 |                  |
| NAMES OF ANY LIVING   | CHILDREN:   |                          |              |                 |                  |
|   |   |                          |              |                 |                  |
| ADDRESS OF CHILDREN   |   |                          |              |                 |                  |
| AGE OF CHILDREN:  |   |                          |              |                 |                  |
| potential pulling the second                                    | CRIPTION:   |                          |              |                 |                  |
| 2. BUILDINGS AND OT   |   | ENTS:                    | None         |                 |                  |
| 3. INSURANCE (Give pa   | rticulars; state wi   | nere policies a          | ге)          |                 |                  |
| 4. TAXES (Amount and w  | here payable)   |                          |              |                 |                  |
| 5. ENCUMBRANCES (In   | cluding any unregi  | stered claims            | or deposit o | f title deed).  |                  |
| 6. OCCUPANCY AND LI   | EASES (If vacant  | so state)                |              |                 |                  |
|   |   |                          |              |                 |                  |

| 8. |   |
|----|---|
|    | STATE IF ANY OTHER PERSON HAS ANY INTEREST:   |
|    | IF FARM LAND STATE CROPS SOWN.  |
|    | TEMENT OF REAL PROPERTY OCCUPIED  |
|    | LOCATION AND DESCRIPTION: I live with my father at R.R. No.1, Han   |
| 2. | LANDLORD'S NAME AND ADDRESS:  |
| 3. | PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:   |
| 4. | STATE WHEREABOUTS OF LEASE:   |
| 5. | SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid)  |
|    |   |
| 5. | IF FARM LAND, PARTICULARS OF CROPS SOWN:  |
|    |   |
|    | EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:   |
|    | GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES,   |
|    | GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:  None |
| 1. | GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:  None |
| 1. | GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:       |

|             | - PILE NO.   |            |
|-------------|--|------------|
| . 1         | NSURANCE CARRIED ON ABOVE PROPERTY: None   |            |
| . 1         | MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESS OTHERS: None  | SION OF    |
|             | MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom).   | None       |
|             | BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State who   | ereabouts) |
| )<br>), ]   | BANK ACCOUNTS: None  LIFE INSURANCE: \$1000 Sun Life Ins. Co. Beneficiary my \$1000 London and Scottish Ins. Co. Ben   |            |
|             | INTEREST IN ANY ESTATES OR TRUSTS. None  |            |
| ı.          | SAFETY DEPOSIT BOX: I use my father's  |            |
|             | PERSONAL DEBTS: None   |            |
| 2           | TRADE DEBTS: None  |            |
|             |  |            |
| rea         | I, the undersigned, hereby voluntarily turn over to the Custodian all my property in the as set out above, excepting fishing vessels, deposits of money, shares of stock, debent ther securities, if any.  I certify that the above information is true and complete and fully discloses all my y description in any protected area in British Columbia and sets forth all my liability. | property   |
| ever        | indirect.  |            |
| ever<br>and | Dated this 2nd day of May 1942   | 5          |
| ever<br>and |  | 5          |

# Date Seel-ailys. INFORMATION FROM R.C.M.P. Our File No. 7336 Full Name KAWAMOTO (Surname An Block Registration No. 10859 Male - Female Age Mar. 24,1921 Former Address \_ thane, & C. Date Evacuated Aug. 3//2 Naturalized - Canadian-Born - National (check) Present Address 4. Mg. J. Cools Married - Single Name of Wife (check) Name of Husband Cots Name of Father Samouke # 11188

Name of Mother (ANAKA) Kolo Name of Father Sambuke #1188

Name of Children under 16 #11249

Requested by ECT: Registered with Custodian (Yes or No)

Additional Information . Millians

Additional Information .//lilling

### Attention: F. X. A. Biron

Office of the Custodian, Victoria Building, 7 O'Connor Street, OTTANA, Ontario.

Dear Sire:

Re: London & Scottish Policies #127833-- Bayes Kawamoro #127837-- Hiroshi Kawamoro

Your latter of Nevember 23rd addressed to Mr. Wright has been given to me for attention.

The above two policies sever on the lives as shown being some of densure Kamadaro, and as stated both policies show the father, San-auka Kamadaro to be the beneficiary.

The father and the two sons are not considered enemies under the maching of the Revised Regulations Respecting Trading with the Enemy, and these policies do not vest in the Custodian .

According to our records these two policyholders and their father are not residing in enemy or proscribed territory. Their present address is R. S. No. 3, B.H. District, Vernon, B.C.

Trusting that this assers your enquiry,

Yours truly,

S. M. Gibson, Insurance Department

### LIFE INSURANCE

ame Sueo Kawamoto

File No. 7336

Vernan Be

10859

Company London & Scottish Assur

Agency

Policy No. 127833

Premium - \$ 19.45

Payable: Annually, Semi-annually or monthly

Month July Day 15

REMARKS:

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