THE PROPERTY OF THE PROPERTY O

New Westminster B.C.

FILE NO. 798/

OFFICE OF THE CUSTODIAN

| To be comp | JAPANESI | E SECTION IN | FILE NO. 798 |
|---|---|----------------|----------------------------|
| NAME: | persons of the Japanese r | ace having | |
| HOME ADDRESS: | JAPANESI LISGAWA (Kikuye) iver-pool id. | Mrs Sotojiro | protected area. |
| SEX: Female | S. W. | stm_nst_n | |
| OCCUPATION AND EMPLOY | AGE: 29 | D. CNEGIS | TRATION No. 08071 |
| NAME OF WIFE OR HUSBAN | - rasawite | MARRIED?_ | Yes |
| NAMES OF LIVING CHILDREN | NIK | ADDRESS Agil | |
| | (4) 8 | ADDRESS: Geik | le. Camp. |
| | Tadashi (M) 6 | ADDRESS: Liver | ool Rd., S. Wester |
| I certify that the above information of the protected area in British Columbia. | Masue (F) 5 | ADDRESS: | " "ester |
| Dated this 6th | true and complete and sta | te that I have | |
| TINESS: 2017 | Masue (F) 5 nation is true and complete and sta | | any kind whatsoever in any |
| | Willen , | | yawa |
| | | | 1-WE |

FOR DEPARTMENTAL USE

HOM DO YOU PROPOSE TO PAY THESE OFF?

FILE No. 2000

OFFICE OF THE CUSTODIAN JAPANESE SECTION

| NAME: (In Pull) Kikuye KITAGAWA | |
|---|--------------------------------|
| HOME ADDRESS: (Before Evacuation) REGISTRATION NUMBER 08071 SEX: fema | le AGE: 30 |
| OCCUPATION: House wife. | |
| (If any business or businesses carried on, state where, under what name a partnership with anyone; if partnership, give partner's name.) | nd whether carried on by yours |
| EMPLOYER: No business carried on. | |
| MARRIED? | |
| NAME OF WIFE OR HUSBAND: | |
| ADDRESS OF WIFE OR HUSBAND: | |
| | |
| NAMES OF ANY LIVING CHILDREN: | |
| | |
| | |
| ADDRESS OF CHILDREN: | • |
| AGE OF CHILDREN: | |
| STATEMENT OF ALL REAL PROPERTY (Each parcel must) | oe mentioned and particulars |
| STATEMENT OF ALL REAL PROPERTY (Each parcel must be a Location and description: No property real Area. 2. BUILDINGS AND OTHER IMPROVEMENTS: None | be mentioned and particulars |
| STATEMENT OF ALL REAL PROPERTY (Each parcel must in the Location and Description:Mo_property_res | e mentioned and particulars |
| STATEMENT OF ALL REAL PROPERTY (Each parcel must) 1. LOCATION AND DESCRIPTION: No property real Area. 2. BUILDINGS AND OTHER IMPROVEMENTS: None | e mentioned and particulars |
| STATEMENT OF ALL REAL PROPERTY (Each parcel must) 1. LOCATION AND DESCRIPTION: No property real Area. 2. BUILDINGS AND OTHER IMPROVEMENTS: None 3. INSURANCE (Give particulars; state where policies are) | None |

| No where. | |
|--|-----------------------------------|
| ATE WHEREABOUTS OF TITLE DOCUMENTS: No WHELE. | |
| TO ANY OTHER PERSON INTO | |
| FARM LAND STATE CROPS SOWN None | |
| | |
| | |
| TEMENT OF REAL PROPERTY OCCUPIED LOCATION AND DESCRIPTION: No property remaining in | the Protected |
| OCATION AND DESCRIPTION: No property | |
| | |
| LANDLORD'S NAME AND ADDRESS: None | |
| LANDLORD TO THE PARTY PA | D. None |
| PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PA | |
| PARTICULARS | |
| STATE WHEREABOUTS OF LEASE: None | .:d) None |
| STATE WHEREABOUTS OF LEASE:NOBS. SUB-TENANTS, IF ANY (Give name, address, rent and to what date | paid) |
| 5. SUB-TENANTS, IF ANY (C | |
| | |
| | |
| 6. IF FARM LAND, PARTICULARS OF CROPS SOWN: None | |
| 6. IF FARM LAND, PARTICULARD | |
| | |
| | FIXTURES |
| STATEMENT OF PERSONAL PROPERTY OWNED: 1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF EQUIPMENT AND MACHINERY, STOCK IN TRADE AND EQUIPMENT AND MACHINERY, STOCK IN TRADE AND | FURNITURE, FIXTOPERSONAL EFFECTS: |
| 1. GIVE BRIEF DESCRIPTION STOCK IN TRADE. | a |
| 1. GIVE BRIEF EQUIPMENT AND MACHINERY, STORM EQUIPMENT AND MACHINERY, STORM No property remaining in the Protected Are | |
| | • |
| | |
| | |
| | |
| - TPV | AND PETS None |
| 2 HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY | |
| | |
| | |
| | THEREST I |
| | VING ANY INTERES |
| CIVE THE NAME AND ADDRESS OF ANY PERSON HA | VING ANY INTERES |
| 3. GIVE THE NAME AND ADDRESS OF ANY PERSON HA | VING ANY INTERES |

| | FILE NO. |
|--|--|
| INSURANCE CARRIED ON ABOVE PROPER | RTY: None |
| others: None | MS ON PROPERTY IN POSSESSION OF |
| 6. MONEYS OWING TO YOU (State if any of the None) | nese debts assigned and if so, to whom) |
| 7. BONDS, DEBENTURES, SHARES, STOCKS | OR OTHER SECURITIES (State whereabouts |
| | |
| 8. BANK ACCOUNTS: None | |
| 9. LIFE INSURANCE: None | |
| 0. INTEREST IN ANY ESTATES OR TRUSTS: | None |
| 1. SAFETY DEPOSIT BOX: None | |
| LIABILITIES: | |
| 1. PERSONAL DEBTS: None | |
| | |
| 2. TRADE DEBTS: None | |
| | |
| | |
| | |
| I, the undersigned, hereby voluntarily turn over area as set out above, excepting fishing vessels, deport of other securities, if any. I certify that the above information is true and every description in any protected area in British (and indirect, | complete and fully discloses all my property |
| Dated this 20th day of October | 194/3 |
| | (Signature), Kihnyol Setagawa |
| Masmi Tanaka | |

FOR DEPARTMENTAL USE.

INFORMATION FROM R.C.M.P.

| | | DATE Sept 13/43 |
|--------------------------------|--------------------------|--|
| Our File No. 7981 | | |
| Full Name KITAGAWA, Kiku | ve (Wre Setoline) | |
| | Surname in Block Lette | ovs) |
| | | |
| | | |
| Registration No. 08071 | _ Male - Female (Check) | Age Jan. 6, 1913 |
| | | |
| | | |
| Former Address R. R. #1. S | . New Westminster, B. C. | |
| | | |
| | | |
| Date Evacuated Nay 15/42 | . Naturalized - | Canadian-Born - Mationa |
| | | (Check) |
| | | |
| Present Address Kaslo | . B. C. | |
| | | |
| | | |
| Married - Single (Check) | | |
| (Check) | Name of Wife | |
| nee | Name of Husband | Sotojiro #08073 |
| Name of Mother (HORI) Kuni #08 | | 是一种,我们就是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个 |
| Names of Children under 16 | | |
| | See husband's sheet. | |
| | | |
| | | |
| Requested by ECT | Registered | with Custodian |
| | | (Yes or |
| | | |
| Additional Information | | |
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