

8865

FRASER VALLEY

FORM 11-10

Hammond B.C.

FILE No. 5665

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: KAITA (Sue) Mrs Takaji
HOME ADDRESS: Bend Rd., Pitt Meadows B.C.
REGISTRATION NUMBER 142⁴⁹ SEX: Female AGE: 41
OCCUPATION: Housewife

(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: none
MARRIED? Yes
NAME OF WIFE OR HUSBAND: Takaji
ADDRESS OF WIFE OR HUSBAND: Bend Rd., Pitt Meadows B.C.
NAMES OF ANY LIVING CHILDREN: Sumire (F) Enpay (M)
Hana (F) Kazu (F) Uma (M) Fred (M)

ADDRESS OF CHILDREN: Bend Rd., Pitt Meadows B.C.
AGE OF CHILDREN: 19, 17, 15, 12, 11, 4.

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

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: Living with husband at

Bend Rd., Pitt Meadows B.C.

2. LANDLORD'S NAME AND ADDRESS: none

3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID: none

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

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) none

8. BANK ACCOUNTS: none

9. LIFE INSURANCE: Sun Life Assurance Co. \$1000.00. Policy IXX No. Unknown. Beneficiary ~~XXX~~ Husband. Policy in declarant's Poss.

10. INTEREST IN ANY ESTATES OR TRUSTS: none

11. SAFETY DEPOSIT BOX: none

LIABILITIES:

1. PERSONAL DEBTS: none

2. TRADE DEBTS: none

I, the undersigned, hereby voluntarily turn over to the Custodian all my property in the protected area as set out above, excepting fishing vessels, deposits of money, shares of stock, debentures, bonds or other securities, if any.

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 9th day of May 1942.

(Signature) S. Raita

[Signature]
Witness

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

Date August 19/43

Our File No. 8665

Full Name KAITA, (Sue) MRS. Takai
(Surname in Block Letters)

Registration No. 14249

Male - Female
(check)

Age Jan 2, 1901

Former Address P.O. Box 85, Pitt Meadows, B.C.

Date Evacuated 30/5/42

Naturalized - Canadian-Born - National
(check)

Present Address

Sully Bros, Oakville, Ontario

Married - Single
(check)

Name of Wife _____

Name of Husband KAITA, Takai #14250

Name of Mother SURUYAMA, Rikiji

Name of Father SURUYAMA, Takajiro (decd)

Names of Children under 16

See husband's sheet

Requested by

Violet Scott

Registered with Custodian

(Yes or No)

Additional Information

Housewife

(5)

(Information supplied by Ins. Co.)

LIFE INSURANCE

Name MRS. SUE KAITA

*Tully Brook,
Oskunka Mass.*

File No. 3665

Reg. No. 14249

Company Sun Life Insurance Co.,

Agency Vancouver

Policy No. 2202641

Premium - \$ 52.50

Payable: ^X Annually, Semi-annually or monthly

Month August Day 1st

REMARKS:

/

71

Letter sent 7/9/49