Callery

FRASER VALLEY OFFICE

MISSION 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: ONISAKI, Nobutaro
HOME ADDRESS: R.R. No.1, Stave Lake Rd., Mission, B.C.
REGISTRATION NUMBER 14482 SEX: Male AGE: 49
OCCUPATION: Logger,
(If any business or businesses carried on, state where, under what name and whether carried on by yourself or partnership with anyone; if partnership, give partner's name.)
EMPLOYER: Cannell Lake Operations. (formerly)
MARRIED? ** No
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 be mentioned and particulars given
1. LOCATION AND DESCRIPTION: None
2. BUILDINGS AND OTHER IMPROVEMENTS: None
3. INSURANCE (Give particulars; state where policies are)
4. TAXES (Amount and where payable)
5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed)
6. OCCUPANCY AND LEASES (If vacant so state)
CONTROL OF STREET OF STRE

CLAIM ON ANY SUCH PROPERTY MORE	
CIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OI	.8
HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS. None	z
EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS TEMENT OF PERSONAL PROPERTY OWNED:	
IF FARM LAND, PARTICULARS OF CROPS SOWN:	.0
SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid)	's
STATE WHEREABOUTS OF LEASE:	*
PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:	3.
TVADEORD'S NAME AND ADDRESS:	z
LOCATION AND DESCRIPTION: I Live with my father at R.R. No.1, M. Kave Leke Rd.	
TEMENT OF REAL PROPERTY OCCUPIED	
IF FARM LAND STATE CROPS SOWN None	
STATE IF ANY OTHER PERSON HAS ANY INTEREST: None	
STATE WHEREABOUTS OF TITLE DOCUMENTS: None	

INFORMATION FROM R.C.M.P.

DATE Nov. 6/43
butare rname in Block Letters)
Tale - Female Age _Apr. 22. 1893 (Check)
tission, B. C.
Naturalized - Canadian-Born - National (Check)
Popoff Farm, Slocan, B. C.
Name of Wife
(Decid) Name of Father Sekimatsu #13400
Registered with Custodian (Yes or No)
logger.

CERTALL SUPPLY

File No. 93.3

10th October, 1946.

Re: Nobuyaro ONISAKI - Reg. No. 14482

The only exects declared by the above Japanese were a \$50.00 bond and so that Sevings certificates.

Although GRISARI declared no liabilities, a claim was filed against him by the Hissian Memorial Hospital. GRISARI did not reply to our enquiry as to whether this claim was covered, and as he had no funds at this office with which to make settlement, the Hospital was notified to make collection direct.

This file needs no further administration and may now be closed.

THE ABOVE SUMMARY IS CERTIFIED TO BE IN ACCORDANCE WITH THE INFORMATION OB. FILE.

WEAR BLA

10th October, 1946.

The Secretary, Mission Memorial Hospital, Mission, B.C.

Dear Sir:

Res Nobuyaro ONISAKI - Reg. No. 14482

Some time ago you filed a claim of \$7.50 against the above

We have had no reply to our enquiries regarding this claim, and as ONISAKI has no funds at this office with which to make settlement, the Custodian is taking no further action in the matter.

We have no objection to your taking whatever action you see fit in the collection of this account. ONISAKI's present address is care of the Pigeon Lumber Company, Black Sturgeon, Ontario.

Yours truly,

W.E. Anderson, Office of the Custodian.

WEA: HA