ANNE LEGITAL

BUREAU POWELL STREET OFFICE OF THE CUSTODIAN JAPANESE SECTION

FILE NO. 10068

| waterno. | JAPANESE SECT | | GISTRATION No. |
|--|----------------------------|----------------------|--|
| Took Was | t 77th Ave., Van.B. | .U. RE | No |
| ME ADDRESS: | 16 | MARRIED | 经共享分别的 医克里克氏 医克里克氏 医克里克氏 医克里克氏 医克里克氏 医克里克氏 医克里克氏 医二乙二二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二乙二 |
| No.10 | Student at Mage | | |
| CUPATION AND EMPLOYER: | | ADDRESS: | None |
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| ANE OF WIFE OR HUSBAND! | None | ADDRESS: | |
| AMES OF LIVING CHILDREN: | | ADDRESS: | |
| | | ADDRESS: | of any kind whatsoever is |
| | and complete and | state that I have no | property or any among |
| I certify that the above information of the columbia. | nation is true and Company | | property of any kind whatsoever is |
| | Way | | ATT. INUO UNI |
| Dated this 20 30th | day of | (Signature) | |

FOR DEPARTMENTAL USE

HOW DO YOU PROPOSE TO PAY THESE OFF?

None

LIST OF LIABILITIES:

INFORMATION FROM R.C.M.P.

Date May 19/43.

| Name | ONO, Muts | ame in Block Let | ters) | S The Tay | |
|----------------------------|---------------------|-----------------------|-----------------|---------------|------|
| istration No. 1507 | | fale - Female (oheck) | | Oct 5, | 192 |
| mer Address | | 21. 711/ | | | |
| te Evacuated | Junesi | //2 Naturali | | | 1 |
| resent Address | | Zs. | out Lok | e, B.C. | |
| erried - Single (check) | | Name of W | | - - 7 / | 4025 |
| Name of Mother (74) | SUTANI der 16 me | Name of | Father | | |
| Requested by | I. Lundy | | ered with Custo | dian yas | No) |
| Additional Informa | | Student | | | |