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FRASER VALLES TOTOR CROTTE

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: TOMOTSUGU Toshigoro	
HOME ADDRESS: 236 Powell St., Vancouver, B. C. (Stave Lake Cuicide Cre	Cedar Co
REGISTRATION NUMBER 07590 SEX. male AGE: 62	
REGISTRATION NUMBER 07590 SEX: male AGE: 62 OCCUPATION:	
(If any business or businesses carried on, state where, under what name and whether carried on by your partnership with anyone; if partnership, give partner's name.)	ourself or in
EMPLOYER: Stave Lake Cedar Co., Suicide Creek, B. C.	
MARRIED? yes	
NAME OF WIFE OR HUSBAND: Kikuno	
ADDRESS OF WIFE OR HUSBAND: 236 Powell St., Vancouver, B. C.	
NAMES OF ANY LIVING CHILDREN: none	
ADDRESS OF CHILDREN:	
1. LOCATION AND DESCRIPTION: None	
2. BUILDINGS AND OTHER IMPROVEMENTS: none	
3. INSURANCE (Give particulars; state where policies are)	
3. INSURANCE (Give particulars; state where policies are)	

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	TEMENT OF REAL PROPERTY OCCUP	riED unkhouse in	camo	
1.	LOCATION AND DESCRIPTION:			
2.	LANDLORD'S NAME AND ADDRESS:	Stave Lake Ce	der Co., Suicide	Creek
3.	PARTICULARS OF LEASE AND RENT	AND DATE TO WH	ICH PAID: rent fre	•
4.	STATE WHEREABOUTS OF LEASE:	none		
5.	SUB-TENANTS, IF ANY (Give name, ad	dress, rent and to wh	at date paid) none	
6.	IF FARM LAND, PARTICULARS OF CR	OPS SOWN:	none	
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STA	TEMENT OF PERSONAL PROPERTY O	WNED		
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5. MORTGAGES, LIENS	AND OTHER	CLAIMS ON PROPERTY	IN POSSESSION OF
OTHERS:	n	one	
6. MONEYS OWING TO Y	OU (State if any	of these debts assigned and i	
		ne	
		,	
7. BONDS, DEBENTURES	SHARES, STO	KS OR OTHER SECURITI	ES (State whereaboute
	none	(
8. BANK ACCOUNTS:	none		
9. LIFE INSURANCE:	none '		
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10. INTEREST IN ANY EST	ATES OR TRUST	rs. none	
II. SAFETY DEPOSIT BOX		none	
LIABILITIES:			
1. PERSONAL DEBTS:	none	11	
2. TRADE DEBTS:	none		
I, the undersigned, hereb area as set out above, excepti	y voluntarily turn	over to the Custodian all my	property in the protect
residence for the factor of the state of the			
or other securities, if any.		and complete and fully disc	loses all my property
I certify that the above in	nformation is true		all man Bakillatas Par
I certify that the above is every description in any prote	scted area in Briti	sh Columbia and sets forth	an my nabilities dire
I certify that the above in every description in any prote and indirect.	ected area in Briti		
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I certify that the above in every description in any prote and indirect.	ected area in Briti		4. 10 moting

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INFORMATION FROM R.C.M.P.

	DATE Sept. 1/43
Our File No. 10155	
Full Name	
į (Su	rname in Block Letters)
Registration No. 07590	Male - Female Age Mar. 14, 1880 (Check)
	(Check)
Former Address	
Former Address Deedney,	
Date Evacuated 13/6/42	Naturalized - Canadian-Born - National (Check)
Present AddressPondos	a Pine Lbr. Co., Monte Lake, R. C.
Married - Single (Check)	Name of Wife Kikuno #02763
	Name of Husband
me of Mother	Name of Father
dested by more	Registered with Custodian
	(Yes or No)
tional Information Logger	