

10348

PERSONAL

BUREAU POWELL STREET

FILE No. 10248

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: OKINO, Tomi

HOME ADDRESS: Sherman P.O. West Vanc'r, B.C. (Great Northern Cannery)

REGISTRATION NUMBER 06603 SEX: Female AGE: 22

OCCUPATION: Cannery employee.

(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: Great Northern Cannery, West Vanc'r, B. C.

MARRIED? No

NAME OF WIFE OR HUSBAND: None

ADDRESS OF WIFE OR HUSBAND: None

NAMES OF ANY LIVING CHILDREN: None

ADDRESS OF CHILDREN: None

AGE OF CHILDREN: None

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

7. STATE WHEREABOUTS OF TITLE DOCUMENTS. None

8. STATE IF ANY OTHER PERSON HAS ANY INTEREST. None

9. IF FARM LAND STATE CROPS SOWN None

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: Great Northern Cannery, West Vancouver, B. C.

2. LANDLORD'S NAME AND ADDRESS: Living with family.

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

7. STATE WHEREABOUTS OF LEASE AND RENT AND DATE TO WHICH PAID: None

8. STATE WHEREABOUTS OF LEASE: None

9. IF FARM LAND, PARTICULARS OF CROPS SOWN: None

10. STATE WHEREABOUTS OF LEASE AND RENT AND DATE TO WHICH PAID: None

11. STATE WHEREABOUTS OF LEASE: None

12. 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: The Royal Bank of Canada, East End Branch, Vancouver, B.C. Acc, No. 2542 Amount \$706.60 Declarant intends to ~~open~~ this account.

9. LIFE INSURANCE: \$135.00 Prudential Ins. Co. close beneficiary- Policy #98,994,415 in owner's possession.

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 2nd day of June 1942.

[Signature]
Witness

(Signature) Joni Okina

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

DATE Aug. 19/43

Our File No. 10342

Full Name OKINO, Tomi (Miss)
(Surname in Block Letters)

Registration No. 06603

Male - Female
(Check)

Age Apr. 15, 1920

Former Address Sherman P. O., West Vancouver, B. C.

Date Evacuated Sept. 9/42 Naturalized - Canadian-Born - National
(Check)

Present Address Popoff Farms, Slocan, B. C.

Married - Single
(Check)

Name of Wife _____

nee

Name of Husband _____

Name of Mother (YAMAMOTO) Tamano #09613 Name of Father Gonsuke #06601

Names of Children under 16 _____

Requested by _____

Registered with Custodian

(Yes or No)

Additional Information _____