

12260

FORM  
**PERSONAL**

BUREAU POWELL STREET

FILE NO. \_\_\_\_\_

**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: ANDO Chizuko (Miss)

HOME ADDRESS: 157 West 2nd Ave., Vancouver, B. C.

REGISTRATION NUMBER 04339 SEX: Female AGE: 18

OCCUPATION: Student, King Edward High School, now Call 1941.

Then a Paper Box Maker, Vancouver, Paper Box Co., 245 Union St., Vancouver.

(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: Vancouver, Paper Box Co., 245 Union St., Vancouver.

MARRIED? none

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: 157 West 2nd Ave., Vancouver, B. C.

4 room, 2 storey, wooden house.

2. LANDLORD'S NAME AND ADDRESS:

Lives with family. Mother pays the rent.

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)

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) \_\_\_\_\_  
Three \$5.00 War Savings Certificates. In own possession.

8. BANK ACCOUNTS: \_\_\_\_\_ none

9. LIFE INSURANCE: \_\_\_\_\_ none

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 14th day of August 1942.

(Signature) Chyiko Anko

S.M. Chope  
Witness

FOR DEPARTMENTAL USE \_\_\_\_\_

INFORMATION FROM R.C.M.P.

Our File No. 12260 Date May 25/42.  
Full Name ANDO, Chizuko (Miss.)  
(Surname in Block Letters)

Registration No. 04339 Male - Female   
(check) Age Dec. 22, 1923

Former Address 157 Street and Ave., City

Date Evacuated Oct. 3/42 Naturalized - Canadian-Born - National   
(check)

Present Address Tashme, B.C.

Married - Single   
(check)  
Name of Mother (<sup>nee</sup> TAKINO) Haru Name of Wife -  
Name of Husband -  
Name of Father Shigeki # 04007  
Names of Children under 16 # 04007

Requested by [Signature] Registered with Custodian -  
(Yes or No)

Additional Information School Student