

12263



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: MURAKAMI Masa (Mrs. Samizo)

HOME ADDRESS: 376 ~~Box~~ Powell St., Vancouver, B. C.

REGISTRATION NUMBER 03977 SEX: Female AGE: 46

OCCUPATION: Dressmaker,

(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: Mr. Iwata, <sup>E.</sup> 386 Cordova St., Vancouver.

MARRIED? Yes

NAME OF WIFE OR HUSBAND: Samizo <sup>03976</sup>

ADDRESS OF WIFE OR HUSBAND: same as above

NAMES OF ANY LIVING CHILDREN: Emiko (F) —

Satoko (F)

Kimiko (F) Akiko (F)

ADDRESS OF CHILDREN: same as above.

AGE OF CHILDREN: 20, 18, 14, 11 yrs.

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: 376 Powell St., Vancouver, B.C.

Occupies 3 rooms on 2nd floor of rooming house.

2. LANDLORD'S NAME AND ADDRESS:

Mr. Thompson, 376 Powell St., Vancouver, B.C.

3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:

\$19.00 per month. Paid to September 7, 1942.

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

**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) 村上マサ

S.M. Clape

Witness

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



INFORMATION FROM R.C.M.P.

Date May 17/43

Our File No. 12263

Full Name MURAKAMI (Masa) Mrs. Samizo  
(Surname in Block Letters)

Registration No. 03977 Male - Female   
(check)

Age Mar. 22, 1896

Former Address 366 Powell St., City

Date Evacuated Oct. 26/42 Naturalized - Canadian-Born - National   
(check)

Present Address Slocan Extension P.C.

Married - Single  
(check)

Name of Wife -

Name of Mother nee (SHIRAIWA) Name of Husband Samizo #03976

Names of Children under 16 Shika - Name of Father SHIRAIWA, Higechiki

See husband's sheet

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

Additional Information Dressmaker



