

12836

PERSONAL

BUREAU HASTINGS PARK
OFFICE OF THE CUSTODIAN

FILE No. 12836

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: OGURA, Masayoshi

HOME ADDRESS: Now at Hastings Park, Vancouver, B. C.

From Box 55, Port Moody, B. C.

REGISTRATION NUMBER 14310 SEX: male AGE: 21

OCCUPATION: Millhand

(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: Thurston-Flavelle Lumber, Port Moody, B. C.

MARRIED? no

NAME OF WIFE OR HUSBAND:

ADDRESS OF WIFE OR HUSBAND:

NAMES OF ANY LIVING CHILDREN:

ADDRESS OF CHILDREN:

AGE OF CHILDREN:

STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned and particulars given)

1. LOCATION AND DESCRIPTION:

2. BUILDINGS AND OTHER IMPROVEMENTS:

3. INSURANCE (Give particulars; state where policies are)

4. TAXES (Amount and where payable)

5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed)

6. OCCUPANCY AND LEASES (If vacant so state)

7. STATE WHEREABOUTS OF TITLE DOCUMENTS: _____

8. STATE IF ANY OTHER PERSON HAS ANY INTEREST: _____

9. IF FARM LAND STATE CROPS SOWN: _____

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION: Now at Hastings Park, Vancouver, B. C.

Lived with parents in 4 room, wooden dwelling at Port Moody, B. C.

2. LANDLORD'S NAME AND ADDRESS: name unknown (Hindu) at Pt. Moody, B. C.

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

\$10. per month. Paid to date.

4. STATE WHEREABOUTS OF LEASE: _____

5. SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid) _____

6. IF FARM LAND, PARTICULARS OF CROPS SOWN: _____

STATEMENT OF PERSONAL PROPERTY OWNED:

1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS: _____

2. HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS _____

3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR CLAIM ON ANY SUCH PROPERTY _____

4. INSURANCE CARRIED ON ABOVE PROPERTY: _____

5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF
OTHERS: _____

6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) _____

7. BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabouts) _____

8. BANK ACCOUNTS: _____

9. LIFE INSURANCE: Mutual Life Insurance Co., Vancouver, B. C. \$1,000.00
20 yr. endowment. Benef. father (Ukichi). Premiums \$48.04 per
annum. 1942 not yet paid. Policy in owner's possession.

10. INTEREST IN ANY ESTATES OR TRUSTS: _____

11. SAFETY DEPOSIT BOX: _____

LIABILITIES:

1. PERSONAL DEBTS: _____

2. TRADE DEBTS: _____

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 28th day of August 1942.

(Signature)

Masayoshi Agura

Witness

FOR DEPARTMENTAL USE _____

INFORMATION FROM R.C.M.P.

DATE Nov. 20/43

Our File No. 12836

Full Name OGURA, Masayashi
(Surname in Block Letters)

Registration No. 14310

Male - Female
(Check)

Age Dec. 20, 1920

Former Address Box 55, Port Moody, B. C.

Date Evacuated 28/9/42

Naturalized - Canadian-Born - National
(Check)

Present Address c/o Gelco Furniture Co., Montreal, P. Q.

Married - Single
(Check)

Name of Wife _____

Name of Husband _____

Name of Mother MORITA, Yae

#14313

Name of Father Ukichi # 02483

Names of Children under 16 _____

Requested by E.C.T.

Registered with Custodian
(Yes or No)

Additional Information Millhand

(Information supplied by Ins. Co.)

LIFE INSURANCE

Name Masayoshi Ogura

File No. 12836

Reg. No.

Company Mutual Life

Agency

Policy No. 534220

Premium - \$ 48.04

Payable: Annually, Semi-annually or monthly

Month Aug. Day 23

REMARKS:

(Information supplied by Ins. Co.)

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Month Aug Day 23

REMARKS:

12836

May 12, 1944.

Mr. Masayoshi OGURA,
Registration No. 14310,
c/o Geico Furniture Company,
Montreal, Quebec.

Dear Sir:

We enclose herewith our cheque in the amount
of \$3.62 representing refund of 1% Provincial wage
deductions for the first six months of 1941, being
forwarded to you at this time to close out your account
at this office.

Please acknowledge receipt of this cheque.

Yours truly,

H. E. Anderson,
Farm Department.

Enc. (cheque)
WEA/EG

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