

14612

FILE NO. 14612

Yoshiko Adachi

**EVACUATION SECTION**

Rec'd JUN 22 1943

**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: (On file) Yoshiko Adachi (Mrs. Yoji)  
HOME ADDRESS: % Dalip Singh R.R. no 1 Kamloops B.C.  
REGISTRATION NUMBER 03953 SEX: Female AGE: 38  
OCCUPATION: none

(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:  
MARRIED? Yes  
NAME OF WIFE OR HUSBAND: Yoji Adachi  
ADDRESS OF WIFE OR HUSBAND: R.R. no 1 Kamloops B.C.  
NAMES OF ANY LIVING CHILDREN: Sadae, Misae, Kenji

ADDRESS OF CHILDREN: R.R. no 1. Kamloops B.C.  
AGE OF CHILDREN: 16 13 11

**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)

CLAIM ON ANY SUCH PROPERTY

3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR

11-1-18

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

*no property remaining in the partitioned area*

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

**STATEMENT OF PERSONAL PROPERTY OWNED:**

6. IF FARM LAND, PARTICULARS OF CROPS SOWN:

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

4. STATE WHEREABOUTS OF LEASE:

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

2. LANDLORD'S NAME AND ADDRESS:

1. LOCATION AND DESCRIPTION:

**STATEMENT OF REAL PROPERTY OCCUPIED**

9. IF FARM LAND STATE CROPS SOWN

8. STATE IF ANY OTHER PERSON HAS ANY INTEREST:

7. STATE WHEREABOUTS OF TITLE DOCUMENTS:

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: \_\_\_\_\_  
 \_\_\_\_\_
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 20<sup>th</sup> day of June 1943

(Signature) YOSHIKO ADACHI

G. K. Tamura

Witness

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

INFORMATION FROM R.C.M.P.

Date May 17/43

Our File No. 14612

Full Name ADACHI, (Yoshiko) Mrs. Yaji  
(Surname in Block Letters)

Registration No. 03953 Male - Female   
(check) Age Nov. 18, 1905

Former Address 1658 21<sup>st</sup> Ave. City  
133 Victoria St. Kamloops B.C.

Date Evacuated Mar. 25/42 Naturalized - Canadian-Born - National   
(check)

Present Address 133 Victoria St., Kamloops B.C.

Married - Single   
(check)

Name of Wife \_\_\_\_\_

Name of Husband Yaji # 03950 14611

Name of Mother MINAMIMAE, Name of Father MINAMIMAE, Hideichi

Names of Children under 16 Naka # 02148 12148 # 02142

See husband's sheet.

Requested by CC Registered with Custodian \_\_\_\_\_  
(Yes or No)

Additional Information \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_