OCT 1 5 1943

OFFICE OF THE CUSTODIAN JAPANESE SECTION

by persons of the Japanese race having property in any protected area. The proper this property requires such persons to give full particulars as requested in this form.

TAME: A Literary Mada HOME ADDRESS Best Land Son Home 70/ 4th M. E. morth of REGISTRATION NUMBER 06460 SEX Male AGE: 60 and 6 mm OCCUPATION: Nelp Son Store Before Most Road Came				
(If any business or businesses carried on, state warracrabip with anyone; if partnership, give partnership.	there, under what name and where's name.)	ether carried on by yourself or in		
MPLOYER:	no	T T		
IARRIED?				
IAME OF WIFE OR HUSBAND:				
ODRESS OF WIFE OR HUSBAND:	may and	yaye		
ADDRESS OF CHILDREN:	ontorio			
AGE OF CHILDREN:	25 and	27		
STATEMENT OF ALL REAL PROPER 1. LOCATION AND DESCRIPTION:	TY (Each parcel must be n	nentioned and particulars given)		
2 BUILDINGS AND OTHER IMPRO	VEMENTS: U.O.	ME		
3. INSURANCE (Give particulars; sta		UOUF		
5. ENCUMBRANCES (Including any				

7.	STATE WHEREABOUTS OF TITLE DOCUMENTS:	Non
8.	STATE IF ANY OTHER PERSON HAS ANY INTEREST:	non
). 	IF FARM LAND STATE CROPS SOWN	NoN
	TEMENT OF REAL PROPERTY OCCUPIED	
		non
	LANDLORD'S NAME AND ADDRESS:	
	PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAI	D: 101
	STATE WHEREABOUTS OF LEASE:	NoN
	SUB-TENANTS, IF ANY (Give name, address, rent and to what date p	aid)
5.	IF FARM LAND, PARTICULARS OF CROPS SOWN:	Non
P	ATEMENT OF PERSONAL PROPERTY OWNED:	NON
	GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURI EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERS	
2	HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PE	rs NoN
	GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING AN	Y INTEREST IN OR
運		NON

4.	INSURANCE CARRIED ON ABOVE PROPERTY	v. NONE	
5.	MORTGAGES, LIENS AND OTHER CLAIMS OTHERS:	S ON PROPERTY IN POSSESSION	
6.	MONEYS OWING TO YOU (State if any of these	e debts assigned and if so, to whom)	JON
7.	BONDS, DEBENTURES, SHARES, STOCKS OR	OTHER SECURITIES (State whereab	outs)
	BANK ACCOUNTS: Bank of	montreal morth n life	Tan,
10.	INTEREST IN ANY ESTATES OR TRUSTS:	NONE	
11,	SAFETY DEPOSIT BOX:	NONE	
	BILITIES: PERSONAL DEBTS:	NONE	
2	TRADE DEBTS:	NONE	
•	I, the undersigned, hereby voluntarily turn over to a as set out above, excepting fishing vessels, deposit other securities, if any. I certify that the above information is true and con try description in any protected area in British Colun	is of money, shares of stock, debentures,	bonds ty of

Dated this day of 4th Lapt. act 1948

(Signature), Sutzyiro Mada

Witness

FOR DEPARTMENTAL USE

	INFORMATION FROM R.C.M.P. Date
Our File No	Surname in Block Letters)
Registration No	Male - Female Age Mas./864 (check)
Pormer Address	201 E. H. ave., M. Cit. 1.C.
Date Evacuated	Mar. 1662 Naturalized - Canadian-Born - National (check)
Present Address	11 mile Pamp, Tope End, A.C.
Wilbure Married - Single (check)	Name of Wife (TONOGAI) Ama (Alexander) Name of Husband Name of Father Walking (Olev)
Name of Mother 1/4	Name of Husband Sign Name of Father Water 16 Name of Father Water 16
Requested by	Registered with Custodian (Yes or No)
Additional Information	tion Retised Lover Clumbs of The Green Country Cou. N. Coty House of St. Brulevayd City.

(Information supplied by Ins. Co.)

LIFE INSURANCE

Name Yada Sutejiro

File No. NR. /

Reg. No.

NR. 15138

Company Monarch Life

Agency

Vancouver

Policy No. 47002

Premium - \$ 182.75

Payable: Annually, Semi-annually or monthly

Month April Day 30

REMARKS:

seeller sex 28/9/43

(Information supplied by Ins. Co.)

LIFE INSURANCE

Late I'm

mme Yada Suitejiro

File No. NR.

Reg. No.

Company Monarch Life

Agency Vancouver

Policy No. 80709

Premium - \$ 442.00

Payable: Annually, Semi-annually or monthly

Month May Day 19

REMARKS:

letter rent 28/9/93

(Information supplied by Ins. Co.)

LIFE INSURANCE

Mame Yada, Sutejiro

File No. N

NR 15-138

Hope Bank BC

Reg. No.

06460

Company Monarch Life

Agency

Vancouver

Policy No. 47003

Premium - \$ 159.50

Payable: Annually, Semi-annually or monthly

Month April Day 30

REMARKS:

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Letter ment of 19/4/43