

9350

PERSONAL

BUREAU POWELL STREET
OFFICE OF THE CUSTODIAN
JAPANESE SECTION

FILE No. _____

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: MIKAWA, Jun (Mrs. Bungoro)

HOME ADDRESS: 2690 Cambridge, Vancouver, B.C.

REGISTRATION NUMBER 03147 SEX: Female AGE: 35

OCCUPATION: Housewife

(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: None

MARRIED? Yes

NAME OF WIFE OR HUSBAND: Bungoro

ADDRESS OF WIFE OR HUSBAND: 2690 Cambridge, Vancouver, B.C.

NAMES OF ANY LIVING CHILDREN: Toshiko (F) Sumiko (F) Fumio (F)

Emiko (F)

ADDRESS OF CHILDREN: 2690 Cambridge, Vancouver, B.C.

AGE OF CHILDREN: 13, 11, 9, 7,

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: 2690 Cambridge St., Vancouver, B.C.
2 storey 6 roomed stucco house
2. LANDLORD'S NAME AND ADDRESS: Husband
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) 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)
None

8. BANK ACCOUNTS: \$1000 Bank of Montreal, Main & Hastings, Van.B.C. No. unknown.

9. LIFE INSURANCE: None

10. INTEREST IN ANY ESTATES OR TRUSTS:
None

11. SAFETY DEPOSIT BOX: None

LIABILITIES: None

1. PERSONAL DEBTS:

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 16th day of May 1942.

A. McArthur
Witness

(Signature)

J. Maitland

FOR DEPARTMENTAL USE

INFORMATION FROM R.C.M.P.

DATE Apr. 21/43

File No. 9350

Name MAIKAWA, Jun (Mrs. Bungoro)
(Surname in Block Letters)

Registration No. 03147

Male - Female
(Check)

Age July 25, 1906

Former Address 2690 Cambridge St., City

Date Evacuated May 18/42 Naturalized - Canadian-Born - National
(Check)

Present Address Bridge River, B. C.

Married - Single
(Check)

Name of Wife _____

Name of Husband Bungoro #03146

Name of Mother In Japan

Name of Father Dec'd

Names of Children under 16 _____

Requested by ECT

Registered with Custodian
(Yes or No)

Additional Information _____

THE OFFICE OF THE CUSTODIAN: JAPANESE EVACUATION SECTION

OUTLINE OF INFORMATION REQUIRED TO COMPLETE THIS FILE: No. 9350

Name of Owner of Property MAIKAWA, Jun (Mrs. Bungoro) Registration No. 03147
 Address: Police Registration 2690 Cambridge St., City
 As declared 2690 Cambridge St., City
 To which evacuated Bridge River, B.C.
 First Evac. Date 12/5/42
 Internee or enemy alien relationship Mother Enemy File No. Japan
 Family relationships: husband or wife Bungoro File No. 9218 ✓
 Children 16 or over _____ File No. _____
 Father _____ File No. Dec'd Mother _____ File No. _____
 Name of Original Investigator _____
 Bill received _____ Copy sent to Accounting Department _____
 Bill paid _____ Date paid noted on bill _____
 Name and address of Agent for Custodian _____
 Terms of agency _____
 Name and address of Agent for Japanese _____
 Terms of agency _____

REAL PROPERTY (Real Estate):

Property address _____
 Legal description _____
 Search of Land Registry Office _____
 Search of Judgment Book _____
 Vesting order _____
 Certificate of encumbrance _____
 Tax Statement (and date for pre-payment) _____
 Water and other rates _____
 Encumbrances and particulars of each:
 Mortgage _____
 Agreement for Sale _____
 Liens _____
 Judgments _____
 Notice of Tax Sale _____
 Others _____
 Insurance—full particulars _____
 Leases or rental arrangements—full particulars _____
 Liquidated or otherwise disposed of—full particulars _____
 Summary of real Property, as at a given date _____

PERSONAL PROPERTY:

Complete inventory showing various kinds of property:
 Stock-in-trade _____
 Equipment _____
 Household goods _____
 Farm implements and tools _____
 Bills receivable and accounts receivable _____
 Choses in action _____
 Interest in an Incorporated Company in any protected area in British Columbia _____
 Fishing vessels sold or undisposed of _____
 Motor vehicles _____
 Cameras _____
 Radios _____
 Firearms _____
 IN EACH CASE:
 Confirmation of ownership _____
 Encumbrances _____
 Where located _____
 In whose care and all particulars _____
 Insurance—full particulars _____
 Liquidated or otherwise disposed of _____
 Summary of Personal Property as at a given date _____

LIABILITIES:

Claims (Bills payable and account payable)
 Identified _____
 Supported by affidavit _____
 Confirmed _____
 Paid _____
 Dominion Income Tax _____
 Business Tax and Licences _____
 Workmen's Compensation _____
 Summary of Personal Liabilities, as at a given date _____

RECAPITULATION:

Statement of affairs _____

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