FORM NO.

Form Approved Budget Bureau No. 43-R267 Expires Jan. 2, 1950

Mailed Mr3/49

DEPARTMENT OF JUSTICE Washington 25, D. C.

CLAIM FOR DAMAGE TO OR LOSS OF REAL OR PERSONAL PROPERTY BY A PERSON
OF JAPANESE ANCESTRY
(Act of July 2, 1948, P. L. 886, 80th Congress, 2nd Session)

The Attorney General Department of Justice Washington, D. C. , also known as Nowe now residing at 6/8/2 in the County of and State or Territory of DOUGLAS request the adjudication of a claim resulting from my evacuation, exclusion or voluntary departure from a military area on or after December 7, 1941 in the State or Territory of The following information is true to the best of my knowledge and belief and is submitted with the knowledge and understanding that it will be relied upon in considering my claim. 1. (a) Date of birth (b) Place of birth EATTLE WASHINGTON 2. (a) Present Citizenship //NITED STATES (b) Citizenship acquired by (check appropriate square) Birth /X/, Naturalization \_/, Otherwise //. If you check "Otherwise" explain -(c) If naturalized state place and date (Place) Month Day Year 3. (a) Father's name I WAO KUROISHI (b) Father's place of birth KANAGAWA - KEN (c) Mother's name NAO FURUTA (d) Mother's place of birth HIROSHIMA-KEN 4. If you are an alien give Alien Registration Card No.

NOTE: If space provided in this form is insufficient additional pages may be attached.

/1	If answer is use state		Tes of No
(b)	If answer is yes state	pen golla (Place) out you	Month Day Year
		A STATE OF THE PARTY OF THE PAR	TAKAN TAKAN
21	(d) Notice 's pasce of bit	(Ottor Golden	
		7, 1941, voluntarily or invo	
Un	ited States to Japan	Yes or No sell & Decare	+ · · · · · · · · · · · · · · · · · · ·
Re	sidence on December 7,	Yes or No 85/6 80, BROROW 1941 Resis. 025/ West 85	City or Town
4	County	State or Territory	(Flace)
We	ere you (check appropria	te square) evacuated /x/, ex	cluded /_/, or did you
	luntarily depart from a r	EXCLUSIO	N ORDER No. 31
(a)	From which military a	area? ZONE (ONE) REGISTER	ED AT 839 So. CENTRE
(b)	Date MAY 6, 194	( > 14 - 14 - Heatleatton C	ther wise []
(c,		vacuation, exclusion, or volum	
	1060 1/2 CAMULO Street Addres	S STREET LOS ANG	EXES ity or Town
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Use this space for statement of your claim. Your claim should contain a description of the property involved and a statement of all circumstances which you believe show that the damage or loss resulted from your evacuation, exclusion or voluntary departure from a military area. Dates and costs of acquisitions, dates of loss and values at time of loss and all other information that may be helpful in determining your claim should also be included.

Description of Articles	Value on date acquired 10/29/41	Value at time of loss 4/11/42
Household Goods  Consisting of 2-piece davenport; 2 tables; rug and pad; dinette set; 1 set twin beds; rug and pad; dresser and vanity; 1 double bed; 1 rug and pad; 1 dresser; 1 artist's drawing table; 2 garden hoses; 2 ladders; Zenith console radio.	\$ 318.00	\$ 42.00
1 new complete double bed - lost	60.00	51.00
Life Insurance Policy \$3,000.00 life policy on claimant, and claimant was forced to drop policy because of inability to meet premium payments as a result of being forced to sell his profit- able business; lost premiums paid, \$288.92		202.92
Business losses:  Restaurant fixtures and equipment:  Consisting of one-room house; RCA	2,085.30	400.00
console radio; 10 complete booths;  1 long party table; cigarette case (full length of room); Oriental archway partition, electrically lighted; insulation and conduits in dining room and kitchen;		276.00 288,92 51.00
window sign; 6 large Oriental screen paintings; 1 large frame oil painting; 1 2-door 8-cu.ft. Servel gas refrigerator; 1 4-door G.E. commercial refrigerator;	fatch Co. ireed sale	,685,30 33,88 82,35
1 electric soda pop cooler; 2 gas ranges; 1 Chinese 2-burner gas stove with 2 large cooking pans; 1 2-tub sink; 2 steel tables 1 range hood; 1 6x2 rectangular steel		,418.85
table with 3 shelves; 1 12x5 combination work table and dish shelf; 1 desk; 1 desk shelf and table; 1 small gas stove; 1 gas water heater; 1 18-in, exhaust fan; 1 lav- atory; 1 incinerator; 2 garbage cans; 2		
large tubs; 4 doz. large platters; 6 doz. fruit dishes; 4 doz. improved tea cups; 18 tea pots; 3 aluminum trays; 1 tray		

stand; 2 doz. suup bowls; 10 doz. tumblers;

4 doz. large plates; 3 doz. rice bowls; 6 doz. small plates; 18 sugar bowls; 36 salt and pepper shakers; 1 coffee pot; 2 tea kettles; 18 doz. pieces of silverware; 1 doz. creamers; 1 large cookie jar; 1 Neon sign.

Loss on contract with Universal Match Co., \$35,38.

Business expense:

Escrow fee Advance rent on lease Disconnecting Neon sign

\$12.25 60.00 10.00/ \$82.25

## Recapitulation

Loss on sale of household goods	\$	276.00
Loss on premiums paid on life insurance policy	Box	288.92
Loss of new double bed		51.00
Loss on sale of pestaurant fixtures and		Abreses
equipment		1,685.30
Loss on contract with Universal Match Co.	93	35.38
Business expense as a result of forced sale	4	82.25

14. (a) Have you received or are you marties to knoone 15:2,418.85 n by insurance or otherwise for any of the damage or loss claimed?

y departure.

(b) If "yes" explain

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13. (a) What was your occupation, if any, on December 7, 1941?	
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(b) What was your occupation, if any, at the time of your voluntary depart	nre
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evacuation, or exclusion from a military area? None	tech.
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14. (a) Have you received or are you entitled to receive compensation by insu	rance
or otherwise for any of the damage or loss claimed? Yes or No	
(b) If "yes" explain	
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15. (a) Door and other person or persons over or claum apy interest the far property

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15.	(a) Does any other person or persons own or claim any interest in the property
	involved in this claim? No Yes or No
	Yes or No  (b) If "yes" give the name and address of all such persons and the extent of
	their ownership or interest
	(c) Has any claim been filed by the person or persons mentioned in (b) above?
14,	Yes or No (Joint claimants should execute separate claims and submit them attached together at the same time.)
16.	Describe, but do not file with this claim, any documents you have which may
	prove your ownership of the property involved in this claim, its value, or the
	extent of damage or loss now claimed TELEGRAM GIVING OWNER SHIP
13"	LICENSES, ESCROW PAPER, INSURANCE POLICY AND
	RECEIPTS
	claim, give his name and address. Hotz Hotz Attorneys at Law, 1530 City National Bank Building, Omaha & Rebraska.
	eby declared to be true to the best of my knowledge and belief.
are ner	cby declared to be true to the best of my knowledge and belief.
	(jeget) Christewoishi 1/21/49
	Claimant Date

also be included.