

ECSF - 1

Katsuyo Sally Fujii Domoto

Read over the attached copy of this form carefully, noting whether each statement in there is accurate and correct; if there are any corrections note them on the copy.

With respect to specific questions, please note the following:

Nos. 11, 12, 13, 14, 16(b) - read the statements attached to the Form ECSF - 1 of Kenji Fujii; make certain that you agree with them completely, *if any correction on 16(b) please note that correction.*

No. 16(a). Please furnish exact date, to best of present recollection.

DEPARTMENT OF JUSTICE, CIVIL DIVISION

CLAIM NUMBER:

EVACUATION CLAIMS

146-35-23269

AFFIDAVIT

STATE OF _____)

COUNTY OF _____)

SS

KATSUYO SALLY FUJII DOMOTO

, being duly sworn, states as follows:

1. Are you now aware that Federal laws provide severe criminal penalties, including imprisonment, for the making or presenting of false, fictitious, or fraudulent claims against the United States? Yes ☒ or No ____.
2. When and where were you born? September 5, 1915 - Ashland, California
(Month) (Day) (Year) (Place)
3. What is your present address? 16 Union Street, New Rochelle, New York
(Street Address, City, State)
4. Where did you actually reside on December 7, 1941? 24949 Soto Road, Hayward, California
(Street Address, City, State)
5. You have the right to a formal hearing on your claim, at which you could present testimony and evidence, if you so desire. Do you elect to waive this right and request that your claim be considered and adjudicated on the basis of representations and facts set forth in affidavits executed by you, available Government records, your claim form and upon any facts revealed by interviews with you, if any, and by investigations, if any, made by the authority of the Attorney General or his duly authorized representatives? Yes ☒ or No ____.
6. Were both of your parents born in Japan and were both of full Japanese blood? Yes ☒ or No ____.
7. Were you married at the time of your evacuation, exclusion or voluntary departure? Yes ☒ or No ____.

If your claim involves a loss on a life insurance policy, are you forwarding the enclosed LIFE INSURANCE SCHEDULE to the insurance company?

Yes ☒ No ____ Does not apply ____

8. Have you gone to Japan since December 7, 1941? Yes ___ or No x.
9. Were you ever detained, interned, or imprisoned at any time between December 7, 1941, and January 2, 1945, at any place other than an assembly or relocation center? Yes ___ or No x. If "yes", explain giving date and state where you were confined: _____

10. Does your claim include any of the following: Firearms, weapons or implements of war, ammunition, explosives, shortwave radio receiving sets, radio transmitters, cameras? Yes ___ or No x. If "yes", were they deposited with any public authority? Yes ___ or No ___. If any such item was not so deposited, describe the item and fully explain your reason for not depositing it with a public authority: _____

11. Does your claim include any property in which anyone else (other than your spouse) had, or claimed to have, any interest? Yes x or No ___. If "yes", give the name and address of each such person (if any), together with their relationship to you, (if any), and indicate the property involved: _____

see statement attached as answer to No. 11, ECSF-1, claim of Kenji Fujii, No. 14943, which I incorporate as answer to this statement.

12. Did any of such persons file claims in their own name for evacuation losses? Yes x or No ___. If "yes", give file numbers: _____

see answer to no. 11.

13. Were any installment payments owing on any of the property, other than real estate, involved in your claim, or was any of it mortgaged or pledged?

Yes ___ or No x. If "yes", give names, addresses, specify property, state amounts and explain fully: _____

14. Describe in full detail all of the steps you took concerning the disposition, sale, or other handling of the property involved in your claim from the time you became convinced that you would be evacuated or excluded, which you would not otherwise have taken, and give the dates when such actions were taken: my brother Kenji Fujii was in charge of the management and operation of our business and properties and I left matters up to him; he made the arrangements and I incorporate herein the statement attached as answer to No. 14, ECSF-1, claim of Kenji Fujii, No. 14943

15. If your claim form includes alleged loss by reason of expenditure of money to store, transport, or otherwise protect property, list the items of property involved, and give the dates when such expenditures were made and the amounts spent, specifying the purpose of each such expenditure: _____

not applicable

16. (a) When did you finally leave the relocation center? Oct. 1944
(b) Did any loss or damage for which claim is made arise after that date?
Yes x or No _____. If "yes", explain fully: _____

see statement attached as answer to No. 16(b), ECSF-1, claim of Kenji Fujii, No. 14943

17. (a) Does your claim include losses connected with a business? Yes ____ or No x. If "yes", fill in and attach form headed "BUSINESS SCHEDULE".
(b) Does your claim include losses connected with crops? Yes x or No _____. If "yes", fill in and attach form headed "CROP SCHEDULE".
(c) Does your claim include losses connected with a motor vehicle? Yes ____ or No x. If "yes", fill in and attach form headed "MOTOR VEHICLE SCHEDULE".
(d) Does your claim include losses connected with land? Yes ____ or No x. If "yes", fill in and attach form headed "LAND SCHEDULE".

17. (e) Does your claim include losses connected with buildings? Yes ☒ or No ☐.

If "yes", fill in and attach form headed "BUILDING SCHEDULE".

- (f) Does your claim include losses connected with life insurance? Yes ☐ or No ☒. If "yes", fill in "LIFE INSURANCE SCHEDULE" and send it to the insurance company.

- (g) Does your claim include losses relating to personal property not fully covered in the forms mentioned above? Yes ☒ or No ☐. If "yes", fill in and attach form headed "ITEMIZED STATEMENT OF PERSONAL PROPERTY" as to such additional items.

- (h) Does this affidavit, together with the attached schedules, provide a full statement of each loss for which you have claimed? Yes ☐ or No ☐.

If "no", explain fully: _____

☒ Yes ☐ No ☒ I believe it does

18. Were you excluded from any area prior to March 2, 1942? Yes ☐ or No ☒.

If "yes", give area and state date: _____

19. Did any of your alleged loss occur prior to or at the time of such exclusion?

Yes ☐ or No ☐. If "yes", state which losses: _____

not applicable

20. Are there any records or papers that can be presented in support of your

claim? Yes ☒ or No ☐. If "yes", list them below and attach them (or copies of them) to this affidavit. (If too lengthy or bulky to so attach, list them below and bring them with you when you come for hearing upon your claim.) _____

See list attached as No. 20 to ECSF-1, claim of Kenji Fujii, No. 14943

21. Have you received compensation of any kind in any way related to your claim, whether by cash, advances, refunds, credits, supplies, fertilizer, payments for your account, payments upon insurance, or otherwise? Yes ☒ or No ☐. If "yes", state how much was so received and indicate what property was included: _____

see statement attached to No. 21, ECSF-1, claim of Kenji Fujii,

No. 14943

22. If you were evacuated, state the exact date of your evacuation and give the place to which you were first sent: May 13, 1942 - Merced Assembly Center

This affidavit, together with each of its attachments, has been read by me or has been translated to me in Japanese and, unless otherwise noted therein, I feel that I have a full understanding of the contents thereof. I hereby represent that the contents of this affidavit and the accompanying attachments are my own statements under oath and, to the best of my knowledge and belief, they are true.

Signature of Claimant

Subscribed and sworn to before me this

_____ day of _____,

19____, in the City of _____

of the State of _____

(Notary Public, or other Public
Official authorized to administer
oaths, give title)

Note 1 - This affidavit must be signed by the person sworn and if the signature is by other than claimant, this affidavit must be accompanied by legal proof of signer's authority so to act for claimant or his estate.

Note 2 - If insufficient space has been provided for your full answers to any of the above questions, continue your answer on a separate sheet of paper and attach such paper to this affidavit.

JOHN A. GORFINKEL

LAW OFFICES OF

BRYANT & MOLTZEN

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351 CALIFORNIA STREET

SAN FRANCISCO 4



Mrs. Katsuyo Domoto
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New Rochelle, New York

U. S. War Department
Form