FORM NO.

CL. 1 What was your C

in detail your reason or reasons

Form Approved

Budget Bureau No. 43-R267

Expires Jan. 2, 1950

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)

11. If your first or subsequent departure from a military area was voluntary state			
The Attorney General			
Department of Justice > State or Jerritory			
Washington, D. C.			
Street Address City or Town			
I,, also known as, Name of Claimant)			
now residing at 1429-25th Avenue sassassion' exc, in ou or appeartile barrage,			
(City or Town)			
in the County of King and State or Territory of Weshington ,			
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			
(Washington ich military area?			
The following information is true to the best of my knowledge and belief and is sub-			
The following information is true to the best of my knowledge and belief and is sub-			
mitted with the knowledge and understanding that it will be relied upon in considering			
my claim. State or lerritory			
1. (a) Date of birth 30 1912 (b) Place of birth Seattle, Washington Month Day Year			
2. (a) Present Citizenship United States (b) Citizenship acquired by (check			
(c) residence on date of evacuation, exclusion, or voluntary departure			
appropriate square) Birth 7, Naturalization /, Otherwise /.			
(b) Date My 10/2			
If you check "Otherwise" explain			
9. (a) From which military area? Williamy Area #1			
voluntarily depart from a military area / /?			
(c) If naturalized state place and date			
8. Were you (check appropriate square) evacuated / , exclu(blace), or did you			
Wouth Day Aear , State or Territory			
Street Address City or Town			
3. (a) Father's name Tsunezo Tokuda			
(b) Father's place of birth Shiga-Ken, Japan			
6. We (c) Mother, s name Sano Lounds voluntarily or involuntarily deported from the			
(d) Mother's place of birth Shiga-Ken, Japan			
4. If you are an alien give Alien Registration Card No.			
4. If you are an affen give Affen Registration Card No. Mouth Day Year			
(b) If answer is yes state			

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

50	(a) Were you detained or interned as an enemy alien?			
	(b) If answer is yes state	Yes or No		
	(Place)	Month Day Year		
	4. If you are an alien give Alien Registration Card No.			
	(d) Mother's place of barth spiles-Kon, Leoan			
6.	Were you, after December 7, 1941, voluntarily or involu	ntarily deported from the		
	United States to Japan No Yes or No	Non-family and the second		
7.	Residence on December 7, 1941 1413 Bast Spruce	, Seattle		
	Street Address	City or Town		
	County State or Territory			
8.	Were you (check appropriate square) evacuated , ex	cluded / , or did you		
	voluntarily depart from a military area //?			
0		The state of the s		
9.	(a) From which military area? Military Area #1			
	(b) Date May, 1942 .			
	(c) Residence on date of evacuation, exclusion, or volum			
	2. (a) Present Citizenghip Halfad Prates. (b) Citiz			
	1413 East Spruce Day, Company Street Address Company C	Seattle ity or Town		
	King	Washington		
my	claim. County State	or Territory		
10	. If voluntary departure from a military area was followed	ed by later voluntary de-		
	parture, evacuation, or exclusion from a military area a	inswer the following:		
	(a) From which military area?			
		1000		
gebs (b) Were you (check appropriate square) evacuated //, excluded //, or did you				
requebart coluntarily ? a claim resulting from my evacuation, exclusion or voluntary				
777 (ch(c) Date of Ang and State or Territory	or meep reference.		
	Month Day Year	(City or Town)		
NOW	wom (d) Residence on date of this later evacuation, exclusion or voluntary departure			
	I, George Tokuda ' - also known			
44.07		ty or Town		
Der	state or Territory State or Territory			
The	. If your first or subsequent departure from a military as	rea was voluntary state		
	A CALL OF THE PARTY OF THE PART	and was voluntary state		
	in detail your reason or reasons therefor			
	(Act of July 2, 1948, P. L. 886, 80th Congress	s, 2nd Session)		
OF	OF JAPANESE ANCESTRY			
12.	12. (a) What were your addresses after departure from a military area?			
	Puyallup Assembly Center, Washington; Minidoka Relocation Center,			
	Hunt, Idaho; Chicago, Illinois			
(b) What was your War Relocation Authority or Wartime Civil Control Authority				
	(b) What was your War Relocation Authority or Wartime	Civil Control Authority		
	(b) What was your War Relocation Authority or Wartime identification number? Can't remember .	e Civil Control Authority		

STATEMENT OF CLAIM DUE TO EVACUATION

George Tokuda 1429-25th Avenue Seattle, Washington

The claimant was owner of two drug stores in Seattle, Washington. The claimant had purchased Johnson Drug, number 1, located at 1724 Yesler Way in 1935 for \$2000. Johnson Drug, number 2, located at 114-12th Avenue was opened as a new store in 1939. At the time of evacuation claimant closed Johnson Drug, number 2, stored all of the equipment and moved all of the inventory to Johnson Drug, number 1.

- (1) At the time of evacuation the claimant turned the business, merchandise fixtures and equipment to a manager who proceeded to operate and sell merchandise while the claimant was in the Puyallup Assembly Center. At the time of evacuation claimant had a minimum of \$4500 worth of merchandise inventory which was depleted by the manager without any payment being made to the claimant and after the claimant's evacuation, the business, furniture, fixtures and equipment and remaining merchandise was sold for \$1900 cash. In 1947, the claimant repurchased the Johnson Drug, number 1, paying for the fixtures and equipment and the business the sum of \$4500. Said equipment was substantially the same as what the claimant had at the time of evacuation. In addition thereto, the claimant acquired merchandise inventory of \$4000. The value of the business, equipment and merchandise inventory which cost him \$8500 to repurchase in 1947 should have been at least the same as at the time of evacuation. Claimant therefore claims \$8500 lost, less cash received of \$1900 at the time of evacuation, or a total of \$6600 as his loss due to Johnson Drug, number 1, because of the evacuation.
- (2) Claimant was required to dismantle the fixtures and equipment of Johnson Drug, number 2, at the time of evacuation and sustained substantial losses in moving the fixtures, equipment and storage of the property for 20 months. Claimant therefore claims the cost of dismantling, moving and storage in the amount of \$200.
- (3) Claiment was renting an ice cream cabinet from the Carnation Company. After the claimant was evacuated and had left Seattle, the Company insisted that the claimant was purchasing said equipment and that there was a balance due of \$450.00. This amount was collected from the claimant and taken out from the cash received at the time of sale. Subsequently since the claimant has been back in business in Seattle, the company has admitted that they had taken advantage of a bad situation, and therefore the claimant claims the sum of \$450.
- (4) The claimant, in the course of advertising his business, had organized a basketball team with the claimant furnishing all the jackets, uniforms and other equipment. During the claimant's absence said equipment was stolen and therefore the claimant claims for the following:

20 jackets @ \$15 \$300.00 20 suits @ \$5 100.00 4 basketballs @ \$18 72.00 1 First Aid Kit & case 10.00

Total loss on basketball goods - - \$482.00

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. See attached schedule ute asparate claims and submit them attached to 13. (a) What was your occupation, if any, on December 7, 1941?

Druggist (b) What was your occupation, if any, at the time of your voluntary departure, evacuation, or exclusion from a military area? 14. (a) Have you received or are you entitled to receive compensation by insurance or otherwise for any of the damage or loss claimed?

Yes or No (b) If "yes" explain

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

or otherwise for any of the damage or loss claimed? Yes of No	
or otherwise for any of the damage or loss claimed?	
15. (a) Does any other person or persons own or claim any interest in	n the property
involved in this claim? No	
Yes or No (b) If "yes" give the name and address of all such persons and the	e extent of
their ownership or interest 4 900 or home Action Ac	
(c) Has any claim been filed by the person or persons mentioned in	in (b) above?
Aes or No Aes or No Mhat was your occupation, if any, on December 7, 1941?	
(Joint claimants should execute separate claims and submit them a gether at the same time.)	attached to-
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 va	lue, or the
extent of damage or loss now claimedvitnesses and/or affidavi	lts
The second secon	Management of the second of th
	*
17. If you have authorized someone to act for you in all matters pertain	ining to this
claim, give his name and address. William Y. Mimbu	
318-6th Avenue South Seattle 4, Washington	
All statements made herein (including any accompanying schedules and	statements)
are hereby declared to be true to the best of my knowledge and belief.	
Decemb	ber 30, 1949
Claimant	Date
	The state of the s
Lea attracted schedule	
loss and all other information that may be helpful in determining your cla o be jucluded.	
of the property involved and a statement of all circumstances which you to the damage or loss resulted from your evacuation, exclusion or volunta.	
Use this space for statement of your claim. Your claim should contain a	