



LOCATION SERVICE SEARCH REQUEST

Current fee packages begin at \$30. Please call Valery Bazarov, Location Service Specialist, at 212-613-1409 or send e-mail to location@hias.org for further fee information (details will be posted on our website shortly).

Mail this form, along with a check or money order for the appropriate fee package amount, payable to HIAS. Make sure your last name appears on the check or money order. Mail to:

HIAS Location Service
333 Seventh Avenue, 17th Floor
New York, NY 10001-5004

PERSON SOUGHT:

Date: _____

First name: _____

Last name: _____

Maiden name: _____

Other name(s): _____

Gender: Male Female

Date of birth (if unknown, approximate year): _____

Place of birth (country, region, city): _____

Date of arrival to country of immigration: _____

City & country of immigration: _____

Father's first and last name: _____

Father's date of birth: _____

Father's place of birth: _____

Mother's first and last name: _____

Mother's date of birth: _____

Mother's place of birth: _____

Other accompanying family members during immigration	Relationship to the person sought	Date and place of birth

Country and city of immigration: _____

Port of entry & ship name: _____

Last known address: _____

Date of last communication: _____

Notes: _____

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We replanted your family tree®



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INQUIRER:

First name: _____ Last name: _____
Maiden name: _____ Other name: _____
Date of birth: _____ Country and city of birth: _____
Father's name: _____
Mother's name: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
Home phone: () _____ Business phone: () _____ Fax: () _____
E-mail: _____ Other information: _____
Relationship to the person sought: _____
How did you learn about HIAS Location Services: _____

If you are filling out this form on behalf of another person, and would like for us to contact them directly, please provide their contact information below.

First & last name: _____
Address: _____ City: _____ State: _____ Zip: _____ Country: _____
Home phone: () _____ Business phone: () _____ Fax: () _____
E-mail: _____

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