



Mara Coblic, born in Romania. Killed in the Holocaust.

In fulfilling its mandate to memorialize the legacy of each individual Jew who died at the hands of the Nazis and their collaborators, Yad Vashem has been collecting "Pages of Testimony" since the mid 1950's. Submitted by survivors, relatives or friends of victims, Pages of Testimony are preserved as lasting memorials in the Hall of Names at Yad Vashem, Jerusalem. In November 2004, the Page of Testimony collection was integrated into the Central Database of Shoah Victims Names where brief histories and photographs of over three million Holocaust victims may be accessed online.

The names and life stories of millions more victims are in danger of being forgotten. Ensure them a place in history by filling out a Page of Testimony or by assisting Holocaust survivors and others who know of Holocaust victims.

PAGE OF TESTIMONY: INSTRUCTIONS

1. Before filling out a Page of Testimony, search the online Database: **www.yadvashem.org**. If a person appears in the Database, do not submit an additional Page of Testimony. To add information to an existing record, click "Feedback forms for comments" on the site.
2. To submit names online, enter the Database at **www.yadvashem.org** and click: "Submit Additional Names" on the Search Page.
3. If you do not have Internet access, **complete a separate Page of Testimony for each victim** (page over), including children. Additional forms may be photocopied; downloaded from the site (click "Submit Additional Names") or requested from Yad Vashem.
4. **Write clearly in block letters**, using a **pen** and not a pencil.
5. At minimum register the family name (or maiden name) and/or the first name, as well as the place of permanent residence (or place of birth). Additional details are welcomed. Register **family names, first names and names of places in Latin characters** as close to their original spelling as possible.
6. If a child's name is unknown, write his/her parents' names, gender and specify "child" under family status.
7. When available, attach a photograph of the victim to the Page of Testimony.
8. If circumstances of death are unknown, write, **"Died during the Holocaust"**.
9. Sign and date each Page that you submit.
10. Mail completed Pages of Testimony flat and not folded to:
Hall of Names, Yad Vashem, P.O.B 3477, Jerusalem 91034 Israel



- For more information email Yad Vashem, Jerusalem at: central.database@yadvashem.org.il
- For a free resource guide to initiating a Names Recovery Campaign in your community contact: names.outreach@yadvashem.org.il
- Testimonies given to organizations other than Yad Vashem are not in the Central Database.



Page of Testimony דף עֵד

Pages of Testimony commemorate the Jews who perished during the Holocaust.
Please submit a separate form for each victim, in block capitals

Victim's photo Please write victim's name on back. Do not glue	The Martyrs' and Heroes' Remembrance Law 5713-1953 determines in section 2 that: "The task of Yad Vashem is to gather into the homeland material regarding all those members of the Jewish people who laid down their lives, who fought and rebelled against the Nazi enemy and his collaborators, and to perpetuate their names and those of the communities, organizations and institutions which were destroyed because they were Jewish."				
	Victim's family name:		Maiden name:		
	Victim's first name (also nickname):		Previous/other family name:		
Title:		Gender: Male / Female	Date of birth:		Approx. age at death:
Town of birth:		Region:	Country:	Citizenship:	
Victim's father:	First name:		Family name:		
Victim's mother:	First name:		Maiden name:		
Victim's spouse	First name:	Maiden name:		Victim's family status:	Number of children:
Town of permanent residence:		Region:	Country:	Street:	
Profession:		Place of work:		Member of organization or movement:	
Place of residence during the war:		Region:	Country:	Street:	
Places, events and activities during the war (prison / deportation / ghetto / camp / death march / hiding / escape / resistance / combat):					
Place of death:		Region:	Country:	Date of death:	
Circumstances of death:					
I, the undersigned, hereby declare that this testimony is correct to the best of my knowledge. I understand that this Page of Testimony and all the information on it will be publicly accessible.					
First name:		Family name:		Previous/maiden name:	
Street:			City:		State/Zip code:
Country:	Shoah survivor: Yes / No		Relationship to victim (family/other):		
During the war I was in: camp / ghetto / forest / the resistance / in hiding / had false papers (circle relevant options)					

Date: _____

Place: _____

Signature: _____

"ונתתי להם בביתי ובחומותי יד ושם... אשר לא יכרת" ישעיהו נ"ח ה'
"...And I shall give them in My house and within My walls a memorial and a name...that shall not be cut off" Isaiah. 56:5