



ITS-File number, T/D -

Statement on the Return of Personal Effects

The International Tracing Service (ITS) hereby returns the personal items hitherto kept in its archives and formerly owned by

Surname, first name:	
Date of birth:	
Specification of items:	
to the recipient eligible to these items	
Surname, first name:	
Address:	
Email: &	
Family relationship:	
Please mark the appropriate box:	
☐ I herewith expressly confirm that all family members known to me have been informed that I may receive the above-mentioned possession.	
☐ I would like to have the effect(s) sent to me by mail.	
☐ I wish to receive the effect(s) in person at the ITS.	
Please enclose: photocopy of valid proof of identification (e. g. driver's license or passport)	
The signatory releases the ITS from all liability that may occur by way of the transfer of the above-mentioned effect(s). The recipient cannot assert any further legal claims against the ITS.	
The legitimate recipient hereby confirms that the information he/she has provided is true.	
Place, Date	
Signature of the Recipient	

	would like to trace more families in order to enable the return of effects kept here in our ives.
our (this purpose it would be helpful if successfully concluded returns be permitted to appear in conline portal, marked accordingly. This would help us and the many partners all over the d in the search for family members. Moreover it would give hope to the persons cerned that their investigations in archives will lead to concrete results.
	I agree to the further display of photos of the effects returned to me on the ITS website with the remark: "returned".
	I do not agree to the further display of the photos and request the deletion of the photos of the effects from the online portal.
Place, Date	
Signature of the recipient	
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