YAD VASHEM

The Holocaust Martyrs' and Heroes' Remembrance Authority



רשות הזיכרון לשואה ולגבורה

איכל השמות -ת.ד 3477, ירושלים 91034

Hall of Names - P.O.B. 3477, Jerusalem 91034 www.yadvashem.org

Page of Testimony

דף עד

Page of Testimony for commemoration of the Jews who perished during the Holocaust; please fill in a separate form for each victim, in block capitals

Victim's photo Please write victim's name	to gather into the lives, who fought	homeland n and rebelled	naterial rega against the	rding all Nazi en	those memb emy and his	ers o colla	section 2 that: "The ta of the Jewish people aborators, and to perp are destroyed because	who laid down their petuate their names	
on back. Do not glue.	Victim's family name:				Maiden na	Maiden name:			
Do not giue.	BRAUN				BIEDER	BIEDERMAN			
	Victim's first name	tim's first name (also nickname):				Previous/other family name:			
	ESTHER FAIGA	(ESTHER)							
Title:			Gender:					age at death:	
			F			ABOUT 1895		45 - 50	
Place of birth:		Region	:	Country:	·	Nati	onality:		
Visting's First name:				 Fami	ily name:				
father: PINCHUS WOLF			BIED			DERMAN			
First name:			Maiden			name:			
Victim's mother: MATTEL			SCHEIN			NFARBER			
First name:	Maider	Maiden name:			Victim's family st		Number of children:		
Victim's wife/husband: JECHIEL					MARRIE			6	
Permanent residence:			Region: Country:			Address:			
					-		DDZ, POLAND		
Profession:	ace of work:	f work:			Member of org./movement:				
		Region							
Residence before deportation:			:	Country:		Add	ress:		
Places, events	and activities during	g the war (pris	on/deportatio	on/ghetto	/camp/death	marcl	h/hiding/escape/resist	ance/combat):	
Place of death:			Region: Country:			Date of death:			
RAN AWAY TO KIELCE (SMALL TOWN) W/			HINDY & TOBY			BE	TWEEN 1940 AND	1945	
Circumstances of death: PERISHED IN HOLOC	AUST;	I		I		_			
I	, the undersigned, h	nereby declare	e that this tes	timony is	correct to the	e bes	t of my knowledge.		
			nily name:			Previous/maiden name:			
MOISHE		MILLER	ILLER						
Street:		House no.:	Entrance: A	pt.:	City:			State/Zip code:	
1374 EAST 28TH STR	ET				BROOKLY	ſΝ		NY 11210	
Country: USA		Tel.: 718-258-5512			m / I am not a survivor I AM NOT		Relationship to victim (family/other): FAMILY GENEALOGIST		
During the war I was in: camp/ghetto/forest/the resistance/in hiding/had false papers (circl					relevant options)		Holocaust survivors may order a special questionnaire in which to fill in their details.		
Date: 29 Nov 2009 Place: BROOKLYN, NY					Signature: RAU				
MOISHE@LANGSAM.CO									
הו ג"ו ה' And I shall give the"	ישעי י ער <i>"</i> ישעי m in My house d	אשר לא and within	ינשם My walls a	תייד memor	ובחומו rial and a <u>n</u>	יתי ame	תתי להם בבי that shall not be	סק" cut off [®] Isaiah. <u>56:5</u>	