

(1) REGISTRATION NO  
 440453

**A.E.F. D.P. REGISTRATION RECORD**

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 440453

For coding purposes  
 A. B. C. D. E. F. G. H. I. J.

Original  Duplicate

M.  Single  Married   
 F.  Widowed  Divorced

**Polish Jews**

**Marja** (3) Sex (4) Marital Status (5) Claimed Nationality

**Plachta** (2) Family Name

**4.5. 1925 Dabrowa G. Poland Jewish** (8) Number of Accompanying Family Members: **1**

**Mordka Plachta Chana Pilc** (7) Religion (Optional) (11) Full Maiden Name of Mother

**7.12.49 Palestina** (10) Full Name of Father (12) DESIRED DESTINATION (13) LAST PERMANENT RESIDENCE OR RESIDENCE JANUARY 1, 1938. **Poland**

City of Village Province Country City or Village Province Country

(14) Usual Trade, Occupation or Profession (15) Performed in What Kind of Establishment (16) Other Trades or Occupations

**a. Jewish b. German c. Polish** (18) Do You Claim to be a Prisoner of War Yes No (19) Amount and Kind of Currency in your Possession

(17) Languages Spoken in Order of Fluency (20) Signature of Registrant: **Plachta Marja** Date: **3.VII.47** Assembly Center No. **Jew 1043**

(21) Signature of Registrar: **Muller** Date: **3.VII.47** Assembly Center No. **Jew 1043**

(22) Destination or Reception Center: **German Embassy 30.7.48**

(23) Code for Issue: **1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28**

(24) REMARKS: **1. Sachs Balas - Fister**

# MEDICAL CLEARANCE CERTIFICATE

(31) SUPPLEMENTARY RECORD

Temporary Identity Certificate issued—:

	Number	Date	Signature of Authority

SEP 29 1954

SE ) FILE

No 375748

ON SEP. 29 1954

1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th
D. D. Y.	AL. G. M. R. J.	HEAV.	OTHER	I.	L.	I.	L.	I.	L.
<b>Types</b>									
(25) Dates of Disinfection									
(26) PHYSICAL CONDITION ON ARRIVAL									
L.	M.	C. D.	D.						
REMARKS									
(27) IMMUNIZATION RECORD									
Type	Dose	Date	Initials						
T (Epid)	1.								
	2.								
	3.								
D.	1.								
	2.								
T, T. (Tab.)	1.								
	2.								
	3.								
O.									
S. Vacc. Read.	Date	Initials	Reaction						
			I. V. VA.						
(28) Final Medical Inspection —:									
Arrival Medical Inspection —:									
Date									
M. R.									
(29) MOVEMENT AUTHORIZATION OR VISA									
Medical Examiner									
(30) RECEPTION CENTER RECORD									