	(name and surname	(please, write in block capitals)		
	(address (please, write in	n block capitals), phone No., e-mail)	
To Lithuanian Special A				
To Endaman Special 71		APPLICATION		
		(date)		
Please conduct the se	earch and issuance	of documents confirming	g my (please, specif	y family relationship,
As no substitute	when applic	cation concerns the other person)		
deportation (plea	ase, specify the year of depo	ortation and exact location from whi	ch deported – district, villa	age or town)
Surname (-s)	Name (-s)	Patronymic (-s)	Year of birth	Remarks
Was (were) deported to				
From exile returned in		year.		
Convicted members of fa				
(please, specify name	e (-s), surname (-s), patrony	ymic (-s), year (-s) of birth and site,	year and character of repre	essions)
Additional information				
Confirmation documents are needed (please, specify the purpose)				
ATTACHED HERETO				
		ned hereto copies of documents conf	irming personal identity, f	amily relationships
and representation (it necessary)				
	(signature) (name and so			