Application
for receiving Aid for individuals suffered from the Holocaust in the territory of Latvia and having a permanent place of residence outside of Latvia

1.	Your full name and surname (including surnames you had in the past)	maiden name for women and/or any other
2.	Date of birth	
	•	day/month/year
3.	Document confirming identity (check the application)	e appropriate box and attach a copy to this
	□ Passport	
	□ ID card	
	☐ Other (please specify)	
4.	Contact phone number	+
	•	(phone number including country code)
	-	(phone number including country code)
5.	E-mail address (in printed letters)	
6.	Place of residence on June 21, 1941	
7.	Current place of residence	
8.	Mailing address if different from the current place of residence	
9.	Do you have a status of politically repressed copy of the certificate to this application) Yes No	ed person as per Latvian law? (please attach a

	_	at you suffered from the Holocaust in th nt and attach a copy to this application)
1. Bank details		
Bank		
Address		
SWIFT/BIC		
Account number		
	nd processing of my	y data in accordance with the General Data
Protection Regulation (C	·	5 3 3 5 5 4 4 4 5 5 5
☐ I understand that Latvian to request additional doc	·	y Restitution Fund has the right to contact me
☐ I confirm that the inform		
applicant's signature and name,	surname	Date, place
Latvian Jewish Community Restitution Fund	uses your personal data as nec	cessary to provide you services including:

- register your application;
- verify that you meet the requirements for a reception of Aid;
- to identify, prevent or detect fraud or other crime;
- respond to inquiries or requests from you;
- send communications and emails.

We follow appropriate security procedures in the storage and disclosure of your personal data so as to prevent unauthorised access by third parties. We also require those parties to whom we transfer personal data to comply with the same. However, unfortunately, the transmission of information via internet is not completely secure. So, we cannot ensure the security of your personal data transmitted by you to us via internet. Any such transmission is at your own risk and you acknowledge and agree that we shall not be responsible for any unauthorised use, distribution, damage or destruction of your personal data, except to the extent we are required to accept such responsibility by GDPR. Once we have received your personal data we will use security procedures and features to prevent unauthorised access to it.

Please submit completed application by e-mail to applications@lekoref.lv or by post to:

LEKOREF, Skolas street 6-1, Riga LV-1010, Latvia