

**SURROGATE'S COURT OF THE STATE OF NEW YORK,  
BRONX COUNTY**

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In the Matter of the Adoption of  
Children Whose First Names were:

(Docket)(File) No. \_\_\_\_\_

ZALKIND TANNENBAUM  
(Sara)NESSA TANNENBAUM

PETITION FOR  
ACCESS TO SEALED  
ADOPTION RECORDS

.....  
TO THE SURROGATE'S COURT OF BRONX COUNTY:

The Petitioner respectfully alleges to this Court that:

1. [Check applicable box]:

- I am the child who was adopted in the above-entitled proceeding.
- My relationship to the above-named child is as follows [specify]:

Please refer to sworn affidavit, attached.

2. a. I reside at [specify address and telephone number]:

245 West 107<sup>th</sup> Street, Apt. 5E  
New York City, New York 10025  
H (646) 922-8826 (until June 29, 2014)

79 Chestnut Hill  
London, Ontario N6K 4J7  
(519) 641-0495 (after July 1, 2014)

3. Upon information and belief, [check applicable box]:

[Applicable where Petitioner is the adoptee]: I was born in [specify city, village or town and State]: \_\_\_\_\_ on or about [specify date]: \_\_\_\_\_ A certified copy of my birth certificate is attached.

[Applicable where Petitioner is not the adoptee]: [specify adoptee's name]: Zalkind Tannenbaum was born in Manhattan on November 4, 1925; Nessa Tannenbaum was born on June 29, 1927. See Sworn affidavit, appended.

4. Upon information and belief, [check applicable box]:

[Applicable where Petitioner is the adoptee]: I was adopted pursuant to court order in the [specify county and court, if known]: \_\_\_\_\_

■ [Applicable where Petitioner is not the adoptee]: [specify adoptee's name]:  
was adopted pursuant to court order in the [specify county and court, if known]:

On good information, we believe the action occurred in Bronx County.

5. A request for information  has ■ has not been made of the Adoption Information Registry.

6. The names, dates of death, permanent addresses of the adoptive parents, if living, and the adoptee's birth name, if known, are as follows [specify]:

Frank Tannenbaum (birth father) DOD: June 1, 1969 in Manhattan.

Esther Hurwitz, nee Abramson (birth mother): DOB: June 2, 1895; DOD: 8-30-1957

Eliahu Hurwitz (adoptive father): DOB: 6-2-1892 ; DOD: July 1968. Bronx

Zalkind Hurwitz (adoptive sibling): DOB: 11-4-1925; DOD: 6-23-1994, Florida.

Nessa Hurwitz Sternfeld (adoptive sibling): Born 1927; DOD: 5-18-2011, Tarrytown, NY.

7. [Check applicable box(es)]:

I am requesting access to sealed adoption records on medical grounds for the following reasons [specify]:

■ I am requesting access to sealed adoption records for good cause, other than medical, for the following reasons [specify]:

Kindly see Sworn Affidavit, appended.

[Applicable to Native-American individuals 18 years of age and older]: I am requesting access to sealed adoption records, including information about my birth parents' tribal affiliation(s), if any, and other information necessary to protect any rights flowing from such tribal affiliations.

8. No previous application has been made for the relief requested herein except as follows: [Enter "NONE", or specify]: NONE.

I understand that the Court may appoint a law guardian for the purpose of reviewing the file and determining whether the information being sought is in the file and to undertake such other and further instructions that the Court may require.

Another option, of course, would be for the Court to order the Clerk to find the record, for the Court to conduct a de novo inspection of the file, and thereupon schedule a hearing.

WHEREFORE, for the reasons stated in this Petition, I respectfully request access to the sealed adoption records and information sought above and for such other and further relief as this Court deems just and proper.

And HERETOFORE, I further respectfully request a hearing before this Honorable Court to address this petition, hear the Court's concerns, and respectfully answer its questions.

Dated: This \_\_\_\_ day of May, 2014.

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Petitioner's signature

Matthew G. Yeager, Ph.D.  
Criminologist  
245 West 107<sup>th</sup> Street – Apt. 5E  
New York City, New York 10025  
H (646) 922-8826  
E-mail: [myeager@bellnet.ca](mailto:myeager@bellnet.ca)

### **VERIFICATION**

STATE OF NEW YORK        )  
  :ss.:  
COUNTY OF NEW YORK    )

Matthew G. Yeager, being duly sworn, says that he is the Petitioner(s) in the above-named proceeding and that the foregoing petition is true to his own knowledge, except as to matters stated to be alleged on information and belief and as to those matters he believes them to be true.

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Petitioner: Matthew G. Yeager, Ph.D.

Sworn to before me this  
day of \_\_\_\_ day of May, 2014.

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Notary Public