



Rabbi Steven Heneson Moskowitz

Talya Smilowitz, Cantorial Soloist  
Lisa Weiner, President

Kim Bertash, Education Director/  
Office Manager

*You may wish to give tzedakah to your synagogue to celebrate a birthday, anniversary or other milestone or to remember a yahrtzeit*

Mr./Mrs./Ms. \_\_\_\_\_ Date: \_\_\_\_\_  
would like to make a donation to Congregation L'Dor V'Dor's:

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| <input type="checkbox"/> Kol Nidre                                 | <input type="checkbox"/> Adult Education       |
| <input type="checkbox"/> General Fund                              | <input type="checkbox"/> Enrichment Fund       |
| <input type="checkbox"/> Building Fund                             | <input type="checkbox"/> Hebrew Education Fund |
| <input type="checkbox"/> Rabbi Steven Moskowitz Discretionary Fund | <input type="checkbox"/> Literary Club Fund    |
| <input type="checkbox"/> Cantor Talya Smilowitz Discretionary Fund | <input type="checkbox"/> Music Fund            |
| <input type="checkbox"/> President Discretionary Fund              | <input type="checkbox"/> Prayer Book Fund      |
|  | <input type="checkbox"/> Social Action Fund    |

In honor of \_\_\_\_\_ Relationship \_\_\_\_\_ or

In memory of \_\_\_\_\_ Relationship \_\_\_\_\_ or

In appreciation of \_\_\_\_\_ Relationship \_\_\_\_\_

Please send an acknowledgement to: \_\_\_\_\_  
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Enclosed is my donation in the amount of \$ \_\_\_\_\_ Paid by check # \_\_\_\_\_

or Credit Card  Master Card  Visa  American Express

\_\_\_\_\_ I am pleased to help the Temple cover the 3% credit card processing fee.

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Card #: \_\_\_\_\_ V-Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Zip: \_\_\_\_\_