

CONTRIBUTION INFORMATION *(please print)*

Contribution from: Name(s) _____

Address _____

City _____ State _____ Zip Code _____

In Honor of _____

A Speedy Recovery for _____

In Memory of _____

Please send acknowledgement to:

Name _____

Address _____

City _____ State _____ Zip Code _____

Date _____ Amount \$ _____ Phone _____

Congregation Beth Shalom appreciates all contributions .

A minimum contribution of \$12 is required for one tribute card and acknowledgement in the Kol Shalom.

Please make check payable and mail to:

Congregation Beth Shalom
1801 Baynard Boulevard
Wilmington, Delaware
19802



See other side for contribution designation.

PLEASE APPLY MY CONTRIBUTION TO THE FOLLOWING : *(check one)*

- | | |
|---|---|
| <input type="checkbox"/> Congregation Fund | <input type="checkbox"/> Brian Dombchik Fund |
| <input type="checkbox"/> Capital Completion Campaign | <input type="checkbox"/> Budner Fund |
| <input type="checkbox"/> Al Berlin Minyan Fund | <input type="checkbox"/> Cantor Salzer Music Endowment Fund |
| <input type="checkbox"/> Cantor's Discretionary Fund | <input type="checkbox"/> Finger-Gordon Fund |
| <input type="checkbox"/> CBS Endowment Fund | <input type="checkbox"/> Harriet Kaufman Fund |
| <input type="checkbox"/> Hebrew School Fund | <input type="checkbox"/> Jonathan Morris Fund |
| <input type="checkbox"/> Joe and Millie Byer Education Wing | <input type="checkbox"/> Kraft Educational Foundation |
| <input type="checkbox"/> Kitchen Klub | <input type="checkbox"/> Kristol Book Fund |
| <input type="checkbox"/> Library | <input type="checkbox"/> Lewis-Greenbaum Fund |
| <input type="checkbox"/> Prayer Book Fund | <input type="checkbox"/> Linda Goldstein Fund |
| <input type="checkbox"/> Rabbi's Discretionary Fund | <input type="checkbox"/> Schutzman Fund |
| <input type="checkbox"/> Sefer Torah Fund | <input type="checkbox"/> Sholl Fund |
| <input type="checkbox"/> Other _____ | |