

## 2024 BOOK OF REMEMBRANCE ORDER FORM Please return this form NO LATER THAN SEPTEMBER 30, 2024

Please use the template below to list the names of those family and friends you would like to have added to the Book of Remembrance.

Check here \_\_\_\_\_ if you want the same exact listing as last year.

Check here \_\_\_\_\_ if you want to keep the same listing as last year but add additional names

IN LOVING MEMORY OF: (PLEASE PRINT CLEARLY) REMEMBERED BY:

The Book of Remembrance contribution is \$36.00 for the first name listed. Each additional name (up to 9 names) is \$5.00 each. If you have more than 10 names, the contribution is \$90.00.

One Name Listing	\$36.00	= \$
Each Additional Name (up to 9)	\$5.00 each	= \$
Over 10 Names	\$90.00 total	= \$
Tot		

Please complete the information below, attach your check (payable to MLC) and email/mail this form to the synagogue office to Caren Rubin at <u>crubin@mosaiclaw.org</u>. We cannot bill your MLC account. Credit cards are charged a 3% processing fee. Please include your credit cards security code and expiration date.

NAME:			Total Amount Due: \$
Check #		OR NAME ON CREDIT CARD:	
Check one:	Visa	MasterCard	AMEX (use 4-digit code on front of card)
Number:			
Security Code #		Expiration Date:	