

# BOOK OF REMEMBRANCE 5780

## REQUEST FOR LISTING



Please list the following names of our departed loved ones in our Temple *Book of Remembrance*.

Use additional sheets if necessary. **PLEASE PRINT CLEARLY.**

**CLOSING DATE IS SEPTEMBER 10, 2019**

**We recommend a minimum donation of \$18 per name.**

**Enclosed is our donation of \$\_\_\_\_\_**

**Memorial Offering by:**

Name\_\_\_\_\_

Email Address\_\_\_\_\_

Phone\_\_\_\_\_

	Name
1	
2	
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