

Memorial Plaque Purchase Form – Congregation B’nai Israel

Donor Information:

NAME OF DONOR	
EMAIL OF DONOR	
PHONE NUMBER OF DONOR	

___ My \$500 check is enclosed, and made out to Congregation B’nai Israel, Check # _____

Plaque Information:

ENGLISH NAME OF DECEASED	
ENGLISH DATE OF DEATH	
HEBREW DATE OF DEATH (if known)	
TIME OF DEATH (at location of death)	___ before sunset ___ after sunset

Use the following form to spell out the Hebrew name of the deceased using English letters:

Men’s names should include “ben” and the deceased’s parent’s names. Women’s names should include “bat” and the deceased’s parent’s name.

Mem	Lamed	Final Kaf	Kaf	Yud	Tet	Het	Zayin	Vov	Heh	Daled	Gimmel	Bet	Aleph
מ	ל	ך	כ	י	ט	ה	ז	ו	ה	ד	ג	ב	א
N	K	D	F	H	Y	J	U	L	V	S	B	C	T
Abbr.	Tov	Shin	Resh	Kuf	Final Tzade	Tzade	Final Peh	Peh	Ayin	Samakh	Final Nun	Nun	Final Mem
’	ת	ש	ר	ק	ץ	צ	ף	פ	ע	ס	ן	נ	ם
A	Q	3	R	E	W	M	Z	P	G	X	I	2	O

COPY WILL BE FOLLOWED EXACTLY HOW YOU INDICATE BELOW

CLEARLY WRITE ENGLISH & INSERT LETTERS FOR HEBREW (CAST PLATES ONLY)

FROM Congregation B’nai Israel CODE # _____ ACCOUNT NUMBER 660 PHONE: 413-584-3593
253 Prospect Street _____ _____ FAX: _____
Northampton, MA 01060

UNITED STATES BRONZE SIGN CO. INC.
811 SECOND AVENUE, NEW HYDE PARK, NY 11040
PHONE (516) 352-5155 FAX (516) 352-1761

Please submit this form for review to the Cemetary Committee, who will copy-edit it with the CBI rabbis. Thank you!