

ABATEMENT REQUEST

Abatement Certification

I certify that full payment of the regular dues charged to me by Congregation Brothers of Israel would create a significant financial hardship. I request a reduction of this payment through the Synagogue's abatement program for fiscal year 2018/2019. The amount that I feel I can pay toward my dues is \$_____ for this year.

The circumstances giving rise to my request for abatement are:

I understand that if an abatement is granted, it will be for this fiscal year only (ending June 30, 2019) and that I must demonstrate a continued need to receive an abatement in future years. Abated dues will be due and payable promptly upon granting of abatement. I also understand that this certification will be treated confidentially and that the President of the congregation or the Financial Secretary will speak with me personally about my request if I choose or if they think it would be helpful.

Signed: _____

Name: _____

(print)

Date: _____

Special Circumstances: No one will be denied membership because of financial hardship. If you would like to apply for abatement, please complete the following page and send it to Barry Wind, at bwind@barrywind.com or 14 South State Street, Newtown, PA 18940. Requests for financial adjustments consideration must be submitted in writing to Barry Wind by July 31st. A limited amount of abatement is available for qualified members. All requests will be kept in strict confidence.

To protect your privacy, please mail this page separately to: Barry Wind, at bwind@barrywind.com or 14 South State Street, Newtown, PA 18940