

FORM FOR THE SALE OF CHAMETZ 2023

KNOW YE that I, the undersigned, fully empower and permit **Rabbi Shaul Robinson** or his designee to act in my place and stead, and in my behalf to sell all CHAMETZ possessed by me (knowingly or unknowingly) defined by Torah and Rabbinic Law (e.g. Chametz, doubt of Chametz, and all kinds of Chametz mixtures), as well as Chametz that tends to harden and to adhere to a surface of inside of pans, pots and cooking and usable utensils, and to lease all places wherein the Chametz owned by me may be found, especially in the premises indicated below and elsewhere. **Rabbi Shaul Robinson** and his designee has the full right to sell and to lease by transactions, as he deems fit and proper and for such time which he believes necessary in accordance with all terms detailed in the general authorization contract which is in his possession authorizing him to sell Chametz on behalf of others. I hereby give the said **Rabbi Shaul Robinson** and his designee full power and authority to appoint a substitute in his stead with full power to sell and lease as provided herein. The above given power is in conformity with all Torah, Rabbinical regulations and laws, and also in accordance with the laws of the State of New York and of the United States.

Name: _____ (Please Print)

Home Address: _____ Apt _____

City, State, Zip: _____

The location where the chametz can be found in (Please select at least one) Kitchen ____ food pantry ____
living room ____ bedrooms ____ bathroom ____ other places (specify) _____

Other Addresses Where Chametz may be found (e.g. Office, Second Home, etc.) _____

The approximate value of all chametz being sold is \$ _____ Value of Liquor is \$ _____

I can be contacted at: Phone _____ Email address _____

Signature: _____ Date: _____

IF YOU ARE GOING TO BE AWAY FOR PESACH

I specifically authorize **Rabbi Shaul Robinson** or his designee to sell all Chametz located anywhere in my home at the above address, and to lease my entire home. **To gain access to Chametz please either contact:**

Me at (Phone Number I will be available at) **Or** Keys to My Home will be with:

Name _____

Address _____

PLEASE INDICATE WHAT TIME ZONE YOU WILL BE IN _____

Please return to the synagogue office (In person, or mail) before Monday April 3rd 2023. If you have any questions, please contact the LSS Office at (212) 874-6100 or email rabbi@lss.org

It is customary to give a donation to the Chesed Fund to be distributed to the poor for Pesach (Maos Chittim). Please make checks payable to the LSS Chesed Fund.