

Temple Judea Contributions

Name: _____

Address: _____

City: _____

Zip: _____

Phone: _____

Email: _____

Please circle the fund to which you want to give:

Religious Purposes

Library Fund

Morning
Minyan

Shabbat Welcome
Baskets

Lawrence Friedman Beautification Fund

Maryan Feingold Chesed Fund

Other:

Contributor:

In Memory Of:

In Honor Of:

Speedy Recovery:

Address:

Enclosed is my donation payable to Temple Judea

\$500.00 \$ 54.00

\$200.00 \$ 36.00

\$100.00 Other: \$

Credit Card

Visa or MasterCard (circle one)

(\$30 minimum on credit cards)

Credit Card Number:

Expiration
Date:

Name on Card:

Signature:
