



CONGREGATION BETH DAVID DONATION FORM

FROM _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

PHONE NUMBER: _____

THIS DONATION IS BEING MADE FOR

IN HONOR OF: _____

ADDRESS OF HONOREE: _____

CITY: _____ STATE: _____ ZIP: _____

TYPE OF SIMCHA: _____

IN MEMORY OF : _____

ADDRESS OF INDIVIDUAL TO BE NOTIFIED OF DONATION:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

AMOUNT ENCLOSED: _____

THIS DONATION IS DESIGNATED TO:

PLEASE MAIL THIS FORM AND YOUR DONATION TO:

- General
- Building
- Hebrew School
- Wendy Adler Scholarship
- Gladys Jacober Bar/ Bat Mitzvah Fund

CONGREGATION BETH DAVID
P.O. BOX 3299
NARRAGANSETT, R.I. 02882