

☆ B'nai Zion Donations ☆

Today's Date: _____

FROM: _____

Amount Enclosed \$ _____

*If you are **not** a member of B'nai Zion, please provide mailing address:*

Address: _____ City, State ZIP: _____

In Honor of _____

For the Occasion of _____

In Memory of _____

TO: Please inform: _____ of the donation

*If recipient is **not** a member of B'nai Zion, please provide mailing address:*

Address: _____ City, State ZIP: _____

Appropriate acknowledgements will be sent to inform those recognized with your donation (\$18 minimum suggested).

Donations will be listed in the bulletin.

DO NOT PRINT DONATION IN BULLETIN

Flower donations are read at worship services (\$18 minimum suggested per listing)

DATES TO BE READ: _____

DO NOT READ AT SERVICES

Make Check Payable to **B'nai Zion Congregation** for any of these funds:

\$	Fund	Purpose
	GENERAL	Wherever it is needed most
	BUILDING AND GROUNDS	Repairs and upkeep of the building and the landscaping
	CEMETERY	Upkeep, cleaning, and maintenance of the cemetery plots
	ENDOWMENT	Investment in the future of B'nai Zion
	H.S. JACOBS CAMP SCHOLARSHIP	Helps to assist families to pay for a Jewish camp experience
	LIBRARY	Purchase new reading materials
	MUSIC	Music salaries, instruments, and new music
	RABBI'S DISCRETIONARY	Tzedakah needs as the Rabbi deems appropriate
	RELIGIOUS SCHOOL	Education scholarships, supplies and equipment
	RENOVATION FUND	Help support plans to renovate our sanctuary
	PLAQUES	Wall of Honor or Memorial Light Plaques (call office for info)
	PRAYER BOOK	Varies with need, such as Prayer books or Torah books
	WE CARE	Provides food and comfort for our members in illness or mourning

B'nai Zion Sisterhood

	FLOWERS	Flowers that decorate worship services
	ONEG SHABBAT	Food and drink for after service refreshment
	WOMEN OF REFORM JUDAISM	B'nai Zion Sisterhood dues or donations

B'nai Zion Brotherhood

	BROTHERHOOD	Men's Club of B'nai Zion dues or donations
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Make Check Payable to **B'nai Zion Foundation** for Foundation donations:

	FOUNDATION	Capital improvements necessary to maintain the Temple facilities
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Office Use: MM2K _____ SENT _____ BLTN _____ FLS _____