



**FAIR LAWN JEWISH CENTER/CONGREGATION B'NAI ISRAEL**  
**10-10 Norma Avenue, Fair Lawn, NJ, 07410**

**THIS IS YOUR KOL NIDRE APPEAL FORM FOR 2022/5783**

**Name:** \_\_\_\_\_

**I would like to make a tax-deductible contribution over a ten-month period  
in the amount of:**

☐ \$180 (\$18 a month)      ☐ 250 (\$25 a month)

☐ \$360 (\$36 a month)      ☐ \$540 (\$54 a month)

\* \* \* \* \*

**I would like to join in the President's Council with a  
one-time donation of:**

☐ \$600    ☐ \$750    ☐ \$1,000    ☐ \$1,800    ☐ \$3,600    ☐ \$5,000

*A donation of \$600 or more will enroll you in the President's Council and your name will be inscribed on the President's Council plaque in our lobby. Those who donate \$750 or more will have their name included on the Center letterhead. Please list my/our names on the President's Council as follows:*

\_\_\_\_\_

**Please charge my account: \$**\_\_\_\_\_

**Check enclosed in the amount of: \$**\_\_\_\_\_

***Thank you for your generosity!***