

**JCAB Delegation of Power of Attorney
For Sale of *Chametz***

I, _____, the undersigned, fully empower and permit Rabbi Mordechai Prus of the Jewish Center of Atlantic Beach, 100 Nassau Ave., Atlantic Beach, NY 11509, or his duly appointed agent, to act on my behalf to sell 1) all *chametz* possessed by me (knowingly, or unknowingly) as defined by the Torah and Rabbinic law, 2) any *chametz* to which I have or may have legal responsibility in whole or in part (including corporations or other business entities which own or deal in *chametz* in which I may have an ownership interest or transit goods which may be delivered to me during the period in which ownership of *chametz* is prohibited according to Torah law 3) any *chametz* that adheres to the surface of pans, pots, or cooking and usable utensils or mixtures thereof. I also empower the said Rabbi Prus or his agent to lease all places wherein the *chametz* owned by me may be found during the period commencing:

April 19th through April 27th, 2019

_____ April 18th through April 27th, 2019 (For those spending Pesach in Israel or Europe)

especially in the premises located at:

Property Address: _____

Additional Address: _____

The *chametz* I possess includes the following:

____ Groceries
____ Liquor
____ Medicine
____ Toiletries
____ Pet Foods
____ Other (specify): _____

Exact Location:
____ Kitchen
____ Pantry
____ Garage
____ Basement
____ Bathroom
____ Liquor Cabinet
____ Refrigerator
____ Freezer
____ Attic
____ Closets
____ Cabinets
____ Office (address listed above)
____ Automobile
____ Other (specify): _____

Estimated Value of *Chametz*:

Rabbi Prus has the full right to sell and lease by transactions, as he deems fit for such time that he believes necessary as explained in the general authorization contract to sell the *chametz*. Also, I hereby give the said Rabbi Prus full power and authority to appoint a substitute with full power to sell and lease as provided herein. The above given power is in conformity with all Torah and Rabbinic regulations and laws. This authorization is also intended to conform to the criteria and requirements of the law of the State of New York and the United States. And to this I hereby affix my signature on this _____ day of the month of _____, 2019.

Signature: _____

Phone number (during Pesach): _____

I will be home for Pesach

I will be away for Pesach. The key to my home will be left with:

Name: _____

Phone _____

DEADLINE: 9:30 AM - WEDNESDAY, APRIL 17TH, 2019

Forms can be returned to Rabbi Prus after each of our daily Shacharit and Ma'ariv minyanim

To arrange a different time to submit your form in person, please contact Rabbi Prus (718-619-7729)

If necessary, this form may be emailed/faxed to mordyprus@gmail.com/516-371-5373 or dropped off at the JCAB office

weekdays from 9:30AM-1:30PM