BOOK OF REMEMBRANCE

| | Please inscribe the same as last year | | | | | | | |
|-----------------------------------|--|--------|------------|--|------------|--|----|---|
| | Please inscribe the following names in the Book of Remembrance | | | | | | | |
| (PLEASE PRINT) | | | | | | | | |
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| IN THEIR BLESSED MEMORY I ENCLOSE | | | | | | | | |
| \$18.00 (Ch | ai) | | \$36.00 | | \$54.00 | | \$ | |
| Name | | | | | • | | | |
| Address | | | | | | | | _ |
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BOOK OF REMEMBRANCE

THIS TANGIBLE RECORD OF NAMES OF DEAR DEPARTED ONES IS A DIGNIFIED TRIBUTE TO THOSE WHOM WE RECALL LOVINGLY.

Dear Fellow Congregants:

We shall continue the custom of distributing the Book of Remembrance at the Yom Kippur Memorial Service on Wednesday, October 9, 2019.

Please use the form above and return it no later than **September 9, 2019.**