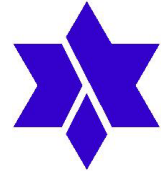




# Congregation Am Tikva Donation Form



**Please print and fill out this page, using a separate form for each donation.**

**I wish to donate to the fund indicated below.**

**Attached is my check for \$\_\_\_\_\_**

**This donation is made:**

- In honor of--     In memory of--     In appreciation of--  
 Speedy recovery to--     Other (please specify)\_\_\_\_\_

**(Name)**\_\_\_\_\_

**Donation made by:**

**Send acknowledgement to:**

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

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

**Address**\_\_\_\_\_

**Address**\_\_\_\_\_

**City, State, Zip**\_\_\_\_\_

**City, State, Zip**\_\_\_\_\_

- Caring Committee Fund – supports the work of the caring committee  
 Children’s Services Fund – supports the running of services for our young ones  
 General Fund – supports the day to day operations of Am Tikva  
 Stan Moss Archives – supports the upkeep of Am Tikva’s historical documents  
 Torah Fund – supports the beautification and upkeep of our Torah

I do not wish to be publicly acknowledged for my donation

**All donations to Congregation Am Tikva are fully tax deductible**

(for office use only)

Date:\_\_\_\_\_

Processed by:\_\_\_\_\_

Amt. Received:\_\_\_\_\_