

Delegation of Power for Sale of Chametz

*Fill out this "Mechirat Chamez" form and mail to Chabad 289 Harold St. Staten Island, N.Y. 10314 or fax to (206) 350-4269
Email: Chabadstateniland @gmail.com*

I _____ fully empower and permit Rabbi Katzman to act on my behalf to sell all Chametz/Mixtures of Chamez owned by me, as defined by the Torah and Rabbinic Law, particularly at the address/es listed below, and elsewhere . This power is in conformity with all Torah, Rabbinic and Civil Laws.*

Residence Address _____ Apt. _____

City/State/
Zip _____

Suite _____

Signature _____ Date _____

***Husband and Wife specify names.**

Must be signed by head of household and preferably by all parties. Send in by 4-5-12 noon

**Call Chabad for all your Passover needs
or to attend our Seder!!**

718 370-8953

