

Mishloach Manot Order Form

My name as it should appear on Mishloach Manot packages: _____

Phone number where I can be reached in case of clarification: (_____) _____ - _____

A. Number of people *from the attached list* to whom I am sending packages: _____

B. Number of additional names I have added at the bottom of this form: _____

C. Total number of people to whom I am sending packages (A + B): _____

D. Total number of people to whom I am sending postcards (names on an attached paper): _____

E. Total packages (C) x \$4.50 = \$ _____

F. Total postcards (D) x \$1.00 = \$ _____

I have enclosed a check for \$ _____ (Total E + F) made out to Congregation Beth Israel Sisterhood.

Please send packages to the following Malden residents who were not on the attached list:

Name: _____ Name: _____

Address: _____ Address: _____

Name: _____ Name: _____

Address: _____ Address: _____

For additional packages and/or to send postcards, please attach additional pages.

In lieu of receiving a package, I would prefer for the value of the packages that I would be receiving to be donated to the sisterhood.

Please return this form and your list of names by February 15, 2008

Mail to: Sisterhood Purim Project
c/o Congregation Beth Israel
10 Dexter Street
Malden, Ma 02148