Plainview Jewish Center

Sisterhood Mishloach Manot Order Form

IF NOT USING ON-LINE ORDERING, PLEASE MAIL THIS ORDER FORM WITH YOUR CHECK PAYABLE TO SISTERHOOD PJC TO: 95 FLORAL DRIVE, PLAINVIEW, NY

BOXES WILL BE AVAILABLE AFTER THE MEGILLAH READING ON MARCH 16, 2022 OR AT THE SYNAGOGUE DURING BUSINESS HOURS THE FOLLOWING WEEK.

Due By Feb. 13

FULL NAME: _____ PHONE: _____

E-MAIL: _____ ADDRESS: _____

Please send Mishloach Manot to the following:

CLERGY: $4.00 EACH

- ☐ RABBI STEVEN CONN & FAMILY
- ☐ CANTOR JUDY MERRICK
- ☐ CANTOR & GERI WOLK (EMERITUS)

NON-MEMBER: $10.00 EACH

BOXES _____

NON-MEMBER BOXES MUST BE PICKED UP AT PJC AND DELIVERED BY SENDER

STAFF: $8.00 EACH

- ☐ DORIT MASS
- ☐ DEBBIE BERMAN
- ☐ FREDDY FRANCO
- ☐ TULIA VASQUEZ

RELIGIOUS SCHOOL STAFF: $8.00 EACH

- ☐ SHIRA ORNSTEIN
- ☐ SUSAN JACOBS (SECRETARY)
- ☐ MEIRA BRODERICK (ALEF)
- ☐ MOLLY MEYERSON (BET)
- ☐ NICOLE GERBER (GIMEL)
- ☐ JOAN LIEBERMAN (GIMEL)
- ☐ SONIA FEINER (HEY)
- ☐ BRENDA REISS (VAV)
- ☐ JASON HYMOWITZ (TA)
- ☐ CHERIE DAVIS (TUTOR)
- ☐ BRIAN GOLDSTEIN (VAV)

MEMBERS/ CHILDREN:

☐ I WISH TO RECIPROCATE TO ANYONE I MAY HAVE OMITTED THAT HAS SENT A BOX TO ME.

FAMILY NAME:	FIRST NAME:	FAMILY $8.00 EACH	CHILD $6.00 EACH
		☐	☐
FAMILY NAME:	FIRST NAME:	☐	☐
FAMILY NAME:	FIRST NAME:	☐	☐
FAMILY NAME:	FIRST NAME:	☐	☐
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FAMILY NAME:	FIRST NAME:	☐	☐
FAMILY NAME:	FIRST NAME:	☐	☐
FAMILY NAME:	FIRST NAME:	☐	☐

USE BACK OF FORM FOR ADDITIONAL RECIPIENTS

#CLERGY X $4.00		#NON-MEMBER X $10.00		#STAFF X $8.00		#REL SCHOOL STAFF: X $8.00		#CHILRENBD X $6.00		#MEMBERS FAMILY X $8.00		TOTAL
	+		+		+		+		+		=	