

## MECHIRAT CHAMETZ FORM

I, \_\_\_\_\_ hereby authorize Rabbi Shua Mermelstein to dispose of all *chametz* which may be in my home, place of business or elsewhere, in accordance with the requirements and provisions of Jewish Law.

My *Chametz* can be found in the following places:

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Enclosed is my payment for the following:

- 1) *Ma'ot Chitim* (food for the poor)
- 2) *Mechirat Chametz* (Rabbi Shua Mermelstein as Agent)

Please pay by check or online at  
<https://www.aderethel.org/donate/>

Congregation Adereth El  
133 East 29th Street  
New York, NY 10016