

Delegation of Power of Attorney for Sale of Chametz

This sheet must be personally presented to Rabbi Rothwachs for the halachik transaction to be made.

I, _____, the undersigned, fully empower and permit Rabbi L. Rothwachs of Congregation Beth Aaron, 950 Queen Anne Road, Teaneck, NJ 07666 to act in my place on my behalf to sell all forms of *chametz* (leaven) possessed by me knowingly or unknowingly, as defined by Torah and Rabbinic law, and to lease all places in which *chametz* owned by me may be found, especially at:

Address: _____

The *chametz* I possess includes the following:

TYPE OF CHAMETZ

Groceries Liquors Beer Cereals Flour Noodle products
 Medicines Pet Food Other: _____

EXACT LOCATION

KITCHEN	<input type="checkbox"/> Cabinets	<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Freezer	<input type="checkbox"/> Dishwasher
BEDROOM CLOSET	<input type="checkbox"/> Boxes			
BASEMENT	<input type="checkbox"/> Cabinets	<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Freezer	
LIVINGROOM	<input type="checkbox"/> Cabinets	<input type="checkbox"/> Liquor Bar		
DININGROOM	<input type="checkbox"/> Breakfront	<input type="checkbox"/> Server		
FAMILY ROOM	<input type="checkbox"/> Closet	<input type="checkbox"/> Liquor Bar		
DEN	<input type="checkbox"/> Breakfront	<input type="checkbox"/> Liquor Bar	<input type="checkbox"/> Closet	<input type="checkbox"/> Shelving Unit
BATHROOM (S)	<input type="checkbox"/> Cabinets	<input type="checkbox"/> Medicine cabinets	<input type="checkbox"/> Sink Bottoms	
BAR	<input type="checkbox"/>			
GARAGE	<input type="checkbox"/> Cabinets	<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Freezer	<input type="checkbox"/> Boxes

OTHER: _____

Business Office (if applicable):

Address _____ Suite: _____ City _____

Approximate Total Value \$ _____

PLEASE COMPLETE IF YOU WILL BE AWAY FOR PESACH

I specifically authorize Rabbi Rothwachs to sell all *chametz* located anywhere in my home at the above address, and to lease my entire home (with the exception of _____). The keys to my home can be found with:

Name _____ Phone _____

Address _____

Please indicate if you will be in a different time zone either at the beginning or the end of Pesach.

Rabbi Rothwachs has the full right to sell and lease by transactions, as he deems fit for such time that he believes necessary as explained in the general authorization contract to sell the *chametz*. Also, I hereby give the said Rabbi Rothwachs full power and authority to appoint a substitute with full power to sell and lease as provided herein.

And to this I hereby affix my signature on this _____ day of March, 2010.

Signature _____ Phone: _____

The following times have been set aside by the Rabbi for the Sale of Chametz in the Shul office:

Monday 3/15: 8:30 – 10:30 PM

Thursday 3/18: 7:45 – 10:00 PM

Sunday 3/21: 7:00 – 9:45 AM

Sunday 3/21: 9:00 – 10:30 PM

Tuesday 3/23: 9:00 -11:00 PM

Sunday 3/28: 7:00 – 9:45 AM