

DELEGATION OF POWER FOR SALE OF CHAMETZ

I/We, the undersigned, hereby fully empower and permit RABBI CHAIM DOVBER (BEREL) SASONKIN to act in my/our place and stead, and in my/our behalf, to sell all *chametz* owned and/or possessed by me/us, both knowingly and/or unknowingly, including, but not limited to, all kinds of *chametz*, possible *chametz*, and *chametz* mixture, including *chametz* that tends to harden and adhere to the surfaces of pots, pans and cooking utensils, as well as pet food that contains *chametz*, as defined by the Torah and by Rabbinic laws, and to lease all places wherein all such *chametz* may be found, particularly at the address/es listed below.

I/We fully empower and permit Rabbi Sasonkin, and give him the full and complete right, to sell and/or lease all such *chametz*, by transactions as he deems fit and proper, and for such time as he deems necessary, in accordance with all detailed terms and forms as explained in the Bill of Sale used in the transaction to sell all my/our *chametz*. I/We further give Rabbi Sasonkin full power and authority to appoint a substitute in his stead, with full power to sell and/or lease *chametz* as provided herein.

The power given herein is in conformity with the Torah, Rabbinic laws, and the laws of the State of New York and the United States of America.

PLEASE PRINT CLEARLY, AND INCLUDE CITY, STATE & ZIP CODE IN ALL ADDRESSES

NAME(S): _____

STREET ADDRESS WHERE *CHAMETZ* IS LOCATED: _____

MAILING ADDRESS: _____

OTHER STREET ADDRESS(ES) WHERE *CHAMETZ* IS LOCATED: _____

E-MAIL ADDRESS: _____

TELEPHONE NUMBER: _____

SIGNATURE(S): _____

DATE: _____

Submit this form to: Rabbi Berel Sasonkin
Chabad of Patchogue
280 Waverly Avenue
Patchogue NY 11772

If you have any questions,
please call 631-903-0174 or e-mail ChabadYIP@Gmail.com