## **Certificate Authorizing the Sale of Chometz**

I/We *	hereby authorize
Rabbi Zushe Greenberg of the Chal	oad Jewish Center of Solon, to dispose of
all chometz that may be in my (our)	possession wherever it may be;
at home, at my (our) place of busine	ess, or elsewhere - in accordance with the
requirements of Jewish Law as incor	porated in the special contract for the sale
of chometz.	
Home Address	
City/State/Zip	
Business address	
City/State/Zip	
Signature(s)	
Date	
* Husband and wife, specify names.	Must be signed by head of household

Please mail, fax or deliver before Thursday, April 18<sup>th</sup> to
Solon Chabad
5570 Harper Rd.
Solon OH 44139
fax 440 498 9966, rabbi@solonchabad.com

and preferably by all parties.