

TEANECK-BERGENFIELD  
**TZEDAKAH COMMITTEE**

# Certificate to Collect Funds

From \_\_\_\_\_ To \_\_\_\_\_

*This certificate is valid and good only for the period stated above. Photocopies should not be accepted.*



*Be it known that we have examined the supporting documents and interviewed:*

Full Name of Solicitor \_\_\_\_\_

Address \_\_\_\_\_

*The above named individual has been authorized to collect funds by the  
 Teaneck-Bergenfield Tzedakah Committee  
 for the purpose stated below within the Teaneck-Bergenfield community.*

Purpose of these Funds     Individual     Institution     Medical     Hachnosas Kallah

Additional Remarks: \_\_\_\_\_

**This section is completed if collection is for an institution or person other than the holder of certificate.**

Name of Institution \_\_\_\_\_

Address \_\_\_\_\_



Signature \_\_\_\_\_

Authorizing Signature \_\_\_\_\_

Whereas the credentials of the above named individual have been verified,  
 The Teaneck-Bergenfield Tzedakah Committee does not endorse any  
 institution or individual charity.