

**CONGREGATION ISRAEL  
of SPRINGFIELD**

**37 THIRTY-SEVEN** 

**ANNUAL DINNER and  
TRIBUTE JOURNAL**

Tuesday Evening  
March 13, 2012 • 19 Adar, 5772  
Crystal Plaza, Livingston, New Jersey



---

RABBI ISRAEL E. TURNER MEMORIAL AWARD  
GUESTS OF HONOR

*Shelley & Cliff Wener*

EDWARD KONIGSBERG MEMORIAL AWARD

*Murray Bell*

AISHET CHAYIL AWARD

*Lee Harelik*

YOUNG LEADERSHIP AWARD

*David Schiffman*

JOSEPH TAMMAM MEMORIAL YOUTH COMMUNITY  
SERVICE SCHOLARSHIP AWARD

*Eleorah Sandman*

DINNER & JOURNAL CHAIRS

Audrey & Zygmunt Wilf  
Marilyn & Dr. Leonard Bielory  
Dolores & Sol Greenfield  
Bobbi & Mel Ostrow  
Danielle & Reuven Pepper  
Sherry & Henry Stein

# CONGREGATION ISRAEL 37th ANNUAL DINNER & TRIBUTE JOURNAL

## ADVERTISING RATES - Shul Members Only

<input type="checkbox"/>	BENEFACTOR <i>10 seats upon request</i> .....	\$ 10,000
<input type="checkbox"/>	DIAMOND <i>4 seats upon request</i> .....	\$ 7,500
<input type="checkbox"/>	EMERALD <i>2 seats upon request</i> .....	\$ 5,000
<input type="checkbox"/>	RUBY <i>2 seats upon request</i> .....	\$ 3,600
<input type="checkbox"/>	PLATINUM <i>2 seats upon request</i> .....	\$ 2,500
<input type="checkbox"/>	GOLD <i>2 seats upon request</i> .....	\$ 1,800
<input type="checkbox"/>	SILVER <i>2 seats upon request</i> .....	\$ 1,200
<input type="checkbox"/>	BRONZE <i>2 seats upon request</i> .....	\$ 1,000
<input type="checkbox"/>	FULL PAGE <i>2 seats upon request</i> .....	\$ 600
<input type="checkbox"/>	HALF PAGE .....	\$ 350
<input type="checkbox"/>	QUARTER PAGE .....	\$ 250
<input type="checkbox"/>	EIGHTH .....	\$ 100
<input type="checkbox"/>	PATRON - 2 line listing .....	\$ 50
<input type="checkbox"/>	MEMORIAL PAGE .....	\$ 300

NAME \_\_\_\_\_

COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

DAY PHONE \_\_\_\_\_ CELL \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

Enclosed is our check for the amount of \$ \_\_\_\_\_

Please return this completed ad blank & make checks payable to:  
**CONGREGATION ISRAEL OF SPRINGFIELD**

PLEASE BILL MY CREDIT CARD \_\_\_ VISA \_\_\_ MASTERCARD \_\_\_ AMEX

CARDHOLDERS NAME \_\_\_\_\_

CARD NO \_\_\_\_\_ CVV2 \_\_\_\_\_

EXP DATE \_\_\_\_\_ AMOUNT TO BE BILLED \$ \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

\_\_\_\_\_

SIGNATURE \_\_\_\_\_

**SOLICITED BY:** \_\_\_\_\_

### AD DEADLINE: MONDAY, FEBRUARY 20, 2012

Please (neatly) write your message below or enclose camera ready art, or attach sheet with ad copy.

Page Sizes (usable area): Full 6.5w x 8h Half 6.5 x 3.5 Quarter 3 x 4 Eighth 3 x 2  
 Patron-2 line listing character count (including spaces): Maximum 42

Your ad may be emailed to: [dinner@congregationisrael.org](mailto:dinner@congregationisrael.org) Please send or attach a PDF or Word Document.

For further information regarding ADS call or email: **Dolores Greenfield 973.467.4923 [greendol@comcast.net](mailto:greendol@comcast.net)**  
 For further information regarding the DINNER call or email: **Danielle Pepper 201.563.2738 [absolutpeppers@yahoo.com](mailto:absolutpeppers@yahoo.com)**  
**CONGREGATION ISRAEL OF SPRINGFIELD • 339 MOUNTAIN AVENUE • SPRINGFIELD, NEW JERSEY 07081**  
**PHONE: 973.467.9666 FAX: 973.467.1463**