# The Rabbinical Assembly כנסת הרבנים

# 2554 Lincoln Blvd. #255Venice, CA 90291

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Rabbi Daniel R Shevitz

*Mesadder Gittin*

**Appointment of Agencies for a GET - Husband**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned, hereby appoint the following individuals to act as my agents in their respective capacities in the writing, witnessing, and delivery of a GET (writ of Jewish divorce) for me and my (former) wife, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I appoint Baruch ben Eliyahu, also known as Barry Bitran, as the scribe. I also appoint Baruch ben Eliyahu to be my agent for acquiring on my behalf the paper, ink, and writing implements used to write the GET; and I appoint him to be my agent to dispose of the remaining paper, ink, and writing implements as he sees fit after the writing of the GET. Let him write a GET specifically for me, for my former wife, and for the purpose of divorce. He may write as many GITTIN as necessary and make whatever corrections necessary in order to write a proper GET.

I appoint Abba Reuven ben Menachem Mendel, also known as Rabbi Richard Flom, and Avraham ben Efraim Halevy, also known as Rabbi Warren Levy, as witnesses to the GET. Let them sign it specifically for me, for her, and for the purpose of divorce.

I appoint Baruch ben Eliyahu, also known as Barry Bitran, as my agent to deliver the GET to my wife or any agent acting on her behalf with the authority to appoint as many sub-agents as shall be necessary, even up to one hundred agents, the GET becoming effective upon reaching her hand. She will then be divorced and permitted to remarry anyone she chooses.

Should any of these agents be prevented from serving, I hereby give permission to Daniel Yisrael ben Shimon Meir, also known as Rabbi Daniel Shevitz, to appoint agents to serve in their stead. I hereby rescind and revoke any stipulations or conditions I may have made regarding this GET, whether orally or in writing.

Signed by me on this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_, in the City of \_\_\_\_\_\_\_\_\_\_\_, State or Province of \_\_\_\_\_\_\_\_\_\_ .

Signed:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witnesses: (These can be any two people who know you and see you sign.)

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE RETURN THIS FORM BY EMAIL ATTACHMENT, NOT POST.