

THE WHITE CHOCOLATE GRILL

AN HONEST AMERICAN DINING EXPERIENCE

Complete and fax this form to 480-353-2445

WCG GIFT CERTIFICATE FAX FORM

Customer Name: _____ Phone #: _____

Quantity: _____ Amount: _____

Credit Card Type: Visa/MC Amex Discover

Card #: _____

Expiration: ____/____

Name and address of customer for
receipt:

Name and address where Gift Certificate is to be sent:

Special Instructions: _____

For company use:

| |
|--|
| Person who received order: _____ |
| Person who processed and mailed order: _____ |
| Date Gift Certificate was mailed: _____ |