

# TRATTORIA GRAPPOLO

## GIFT CARD REQUEST FORM

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### PURCHASER INFORMATION

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
(Where Receipt Will Be Sent)

Credit Card Type (Check one):  Visa  MasterCard  American Express  Discover

Credit Card Number: \_\_\_\_\_

Credit Card Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Amount of Gift Card: \$ \_\_\_\_\_

### RECIPIENT INFORMATION

Name: \_\_\_\_\_

Mailing Address (Where Gift Card Will Be Sent): \_\_\_\_\_

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

Message for Recipient (Happy Birthday, Congratulations, etc.):

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

**Thank you very much for choosing Trattoria Grappolo! Mille Grazie!**

**GIFT CERTIFICATES ARE NOT REDEEMABLE FOR CASH AND ARE NON-REFUNDABLE. EMAIL THIS  
COMPLETED FORM TO [TG@TRAGRA.COM](mailto:TG@TRAGRA.COM) OR FAX IT TO 805.693.1634.**

Owner: Daniele Serra  
PO Box 308, Santa Ynez, CA 93460 · 805.688.6899 · [www.trattoriagrappolo.com](http://www.trattoriagrappolo.com)