

BAROLO RISTORANTE GIFT CARD REQUEST

Please complete form and fax to (815) 722-9744. All requests will be processed once payment has been received. Purchaser will be contacted to confirm the payment information.

Certificate Recipient _____

Amount of Gift Certificate Desired _____

Purchaser _____

Address _____

City/State/Zip _____

Telephone Number (9 am to 6 pm) _____

Fax Number _____

Form of Payment _____

Special Instructions _____

