



Gift Certificate Purchase Form

Please complete this form and fax to 415.775.2601
Or scan & send via e-mail to seafood@scomas.com

| | |
|---|-------------------|
| Name as it appears on card: <i>(Please Print)</i> | Telephone Number: |
| Email Address: | Fax Number: |

I, _____ *(Signature of Authorized Cardholder)* AUTHORIZE
SCOMA'S RESTAURANT TO CHARGE MY CREDIT CARD TO **PURCHASE GIFT CERTIFICATE** IN THE
AMOUNT OF \$ _____.

| | |
|---|--|
| Recipient Information To: _____ Compliments of: <i>(please limit to one line)</i> _____ | Mailing Address: <input type="checkbox"/> Recipient address <input type="checkbox"/> Purchaser <input type="checkbox"/> Will be Pick up in the Restaurant _____ _____ _____ |
|---|--|

Your credit card information below will be destroyed as soon as the business office has completed the transaction.

Payment

CREDIT CARD TYPE: AMEX DINERS DISCOVER JCB MASTER VISA

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____ **DATE SIGNED:** _____

Note:

- Scoma's staff will notify you either by phone or email to confirm your purchase request. Please check with us if you did not receive any confirmation.
- Gift Certificate will be mailed via US mail on the next business day of receiving your order and payment.
- Personal Check is also acceptable. You may enclose your check along with this form and mail to:
Scoma's Restaurant, Pier 47 on Al Scoma Way, San Francisco, CA 94133

For further questions, please call Scoma's at: (415)771- 4383 or toll 1(800) 644-5852