

The Victor Café, Inc
Music Lovers' Rendezvous Fax 215-468-1745

FAX REQUEST TO
(____)_____-____

GIFT CERTIFICATE REQUEST

I _____, do authorize the Victor Café, to charge my: visa, master, discover,
diners club, American express credit card account

_____ exp. _____, the sum of \$ _____ for the purchase of a
gift certificate.

Card Holder

Signature _____ date _____

Mailing address _____

Home Telephone #(____)_____-____ Fax #(____)_____-____

Presented To: _____

Presented By: _____

Special notes _____

Mailing address if other than purchaser

If sent by express over night mail there will be an additional charge of \$10.75Victor

Café Agent Signature _____ date _____ GIFT# _____

ALL ORDERS MUST BE AUTHORIZED AND SIGNED BY CUSTOMER IN ORDER TO BE PROCESSED

THANK YOU FOR YOUR PATRONAGE

The Victor Cafe