



**GIFT CERTIFICATE AUTHORIZATION FORM**

For: \_\_\_\_\_

From: \_\_\_\_\_

Amount: \_\_\_\_\_

Note: \_\_\_\_\_

Restaurant: Kensington Grill Cucina Urbana

*Please fax completed purchase forms to 619.239.6822.*

**Address to send gift certificate**

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ (Fax/Email:) \_\_\_\_\_

**Address to send receipt**

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ (Fax/Email:) \_\_\_\_\_

**Method of payment**

Visa MC Amex Discover

Name as it appears on the credit card \_\_\_\_\_

Credit card number \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_

Amount \$ \_\_\_\_\_

**Authorization**

I, \_\_\_\_\_, hereby authorize Kensington Grill/Cucina Urbana to charge my credit card for the above listed amount.

Authorizing signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY: GIFT CERTIFICATE AUTHORIZED BY \_\_\_\_\_  
DATE GIFT CERTIFICATE MAILED \_\_\_\_\_