

Le Marais

Times Square ©

150 West 46th Street
 New York, NY 10036
 Tel: (212) 869-0900
 Fax: (212) 869-1016
www.lemarais.net

Gift Certificate Order Form

Please allow 5-7 business days for processing.

Gift Certificate Information	
1. To	3. Amount \$ _____
2. From	4. Shipping (Check One) _ a. Regular Mail (No Charge) _ b. Certified Mail (Enter \$6.50) \$ _____ _ c. FedEx (At Own Expense) Acct No. _____
Mail Gift Certificate To:	
6. Name	5. Total \$ _____
7. Address	Payment Information
8. City State ZIP	13. Credit Card Number _____ Exp ___/___
Mail Receipt To:	
9. Name	CV Code: _____
10. Address	14. Name on Card
11. City State ZIP	15. Signature X
12. Phone Fax	Please enclose copy of front and back of the credit card <i>I hereby authorize Le Marais Restaurant to charge my credit card for gift certificate purchase and shipping for the amount listed above.</i>

GC No. _____

Mailed ___/___/___