

ORDER FORM

SHIPPING ADDRESS

(Business address strongly recommended. No P.O. Boxes. Adult signature required upon delivery of wine)

Name: _____
 Shipping Address: _____
 City: _____ State: _____ Zip: _____
 Daytime Phone: _____ Evening Phone: _____
 Email: _____

BILLING ADDRESS

Name: _____
 Billing Address: _____
 City: _____ State: _____ Zip: _____
 Daytime Phone: _____ Evening Phone: _____
 Email: _____

WHITE WINE

	Qty
Sauvignon Blanc Danielle Vineyard	\$25 _____
Rosé of Pinot Noir	\$25 _____
Fumé Blanc Estate	\$30 _____
Blanc de Noirs	\$45 _____
Chardonnay Foppoli	\$45 _____
Late Harvest Sauvignon Blanc	\$29 _____

RED WINE

	Qty
Pinot Noir Cuvee	\$34 _____
Pinot Noir Estate.....	\$45 _____
Pinot Noir Three Sons	\$75 _____
Merlot Windacre Vineyard	\$34 _____
Malbec Lower Pond.....	\$45 _____
Cabernet Franc Windacre Vineyard	\$45 _____
Cabernet Sauvignon Windacre Vineyard	\$36 _____
Cabernet Sauvignon Rockpile	\$65 _____
Petite Verdot Los Amigos	\$60 _____
Right Bank	\$55 _____
Miktos Red Wine Blend	\$65 _____
SNED Red Wine Blend.....	\$25 _____
Late Harvest Cabernet Sauvignon & Cabernet Franc	\$29 _____
Olive Oil, Estate.....	\$30 _____

Prices reflect current vintages and are subject to availability

Sub Total _____
 Packaging & Shipping: _____
 Shipping CA residents _____
 Shipping Out of CA _____
 (sales tax may apply)
TOTAL _____

Payment method: Visa MC Amex Discover

Credit Card Number: _____ Exp. Date: _____

Signature: _____

Name as it appears on credit card (please print) _____