

606 HUGER/DARRYL/HUGER Room

189.00 08/16/16 12:15 Depart Time

1419 1830

NK Туре SINCLAIR BROADCAST G 11 $\frac{08}{14}$ 16 15:30

ACCT# GROUP

164 10706 BEAVER DAM ROA **PASSPORT:** AXXXXXXXXXXXXX1005

HUNT VALLEY MD 21030

MRW#:

Clerk	Address			lyment		
DATE	REFERENCE		CHAR	GES	CREDITS	BALANCE DUE
08/14 08/14	ROOM ROOM TAX	606, 1 606, 1		.00		
08/15 08/15	ROOM ROOM TAX	606, 1 606, 1		.00 .91		
08/16 PAYN	CCARD-AX MENT RECEIVED				435.82 XXXXXXXX	XXXX1005

.00

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO: DRHUGER@WACH.COM
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X__