Name & Address

SKIVIAT, ROBERT F

DETROIT - DEARBORN

Room Arrival Date Departure Date 459/NK1 10/23/2019 2:52:00 PM 10/24/2019 7:10:00 AM

AMOUNT

Adult/Child Room Rate

H7F

Rate Plan: HH # AL: Car:



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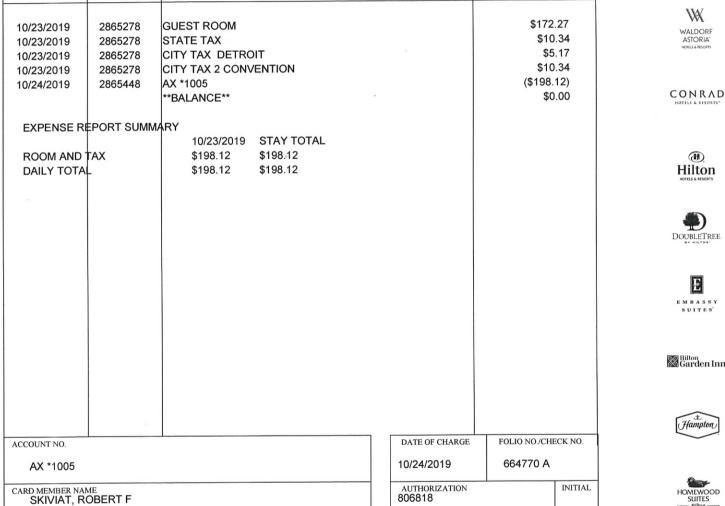
ESTABLISHMENT NO. & LOCATION

CARD MEMBER'S SIGNATURE

REFERENCE

10/24/2019

DATE



ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

DESCRIPTION

