



ReservHotel LLC  
 3363 NE 163<sup>rd</sup> Street, Suite 704  
 North Miami Beach, FL 33160  
 U.S.A.  
 Ph: 305-354-9400  
 Fx: 305-354-9200

**CREDIT CARD DEBT AUTHORIZATION LETTER**

I \_\_\_\_\_ (card holder's name)

authorize ReservHotel LLC. to charge on my credit card:

**Total amount of:** \_\_\_\_\_ USD\$

**AMERICAN EXPRESS:** \_\_\_\_\_

EXP. DATE: \_\_\_\_\_ CVC # \_\_\_\_\_

**MASTER CARD** \_\_\_\_\_

EXP. DATE: \_\_\_\_\_ CVC # \_\_\_\_\_

**VISA** \_\_\_\_\_

EXP. DATE: \_\_\_\_\_ CVC # \_\_\_\_\_

**Reference to Invoice #(s)** \_\_\_\_\_

(if paying more than one invoice, please give amount for each invoice)

**Hotel Name:** \_\_\_\_\_ **Hotel Number:** \_\_\_\_\_

**City/State:** \_\_\_\_\_

**Country:** \_\_\_\_\_

**Card Holder's Full Name:**

**Card Holder's Signature**

\_\_\_\_\_

**Billing Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PLEASE SEND FAX BACK AT:**  
**USA:** (305) 354-9200  
**International:** 00-1-305-354-9200  
**Attn:** Accounting Department