



WILSHIRE GRAND

LOS ANGELES

CREDIT CARD AUTHORIZATION

On this _____ day of _____, 2010, I hereby authorize the **Wilshire Grand Los Angeles** to charge my credit card as indicated below. By doing so, I guarantee full payment of the account as described.

Name of Guest(s)	Confirmation Number(s)	Arrival/Departure Dates

BILL TO INCLUDE (Please check appropriate boxes):

Room & Tax Only Garage/Parking

- ◇ **AUTHORIZATION MUST INCLUDE A CLEAR PHOTOCOPY OF FRONT AND BACK OF THE CREDIT CARD OR IT WILL NOT BE PROCESSED**
- ◇ **TOTAL AMOUNT OF ROOM AND TAX FOR WHOLE STAY WILL BE CHARGED UPON RECEIPT OF COMPLETED FORM**
- ◇ **COMPLETED FORM MUST BE RECEIVED AND APPROVED THREE BUSINESS DAYS PRIOR TO GUEST(S) ARRIVAL**

Credit Card Number: _____

Type of Credit Card: _____ Expiration Date: _____

(American Express, Visa, MasterCard, Discover, Diners Club, JCB) Security Code: _____

Cardholder's Name (Print): _____

Cardholder's Signature: _____

Cardholder's Billing _____

Address: _____

Cardholder's Phone.#: _____

Cardholder's E-mail: _____

Upon completion, Please return this authorization to the Credit Department by fax at (213) 612-3978

If you should have any questions, please call (213) 612-3904

Thank you.