



225 West Valley Boulevard  
 San Gabriel, CA 91776  
 (626) 270-2700 Phone  
 (626) 270-2720 Fax  
 Attention: Medeline Yu  
 Email: Medeline.Yu@Hilton.com

## Credit Card Authorization Form

I hereby authorize the Hilton Los Angeles/San Gabriel to charge my credit card for the following reservation.

GUEST NAME \_\_\_\_\_

ARRIVAL DATE: \_\_\_\_\_ CHECK OUT DATE: \_\_\_\_\_

CFN# \_\_\_\_\_ ROOM RATE: \_\_\_\_\_

MAXIMUM AMOUNT BEING AUTHORIZED: \$ \_\_\_\_\_

OR

Date: May 23, 2020

EVENT NAME: WORLD BATTAMBANG FRIENDSHIP BANQUET 世界馬德望鄉親校友歡聚大會

The name or confirmation number of the guests authorized to use this card is \_\_\_\_\_  
 during the dates beginning \_\_\_\_/\_\_\_\_/\_\_\_\_ and ending \_\_\_\_/\_\_\_\_/\_\_\_\_

Please choose **ONLY ONE** credit card:

VISA \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

MASTER CARD \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

DINERS CLUB \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

DISCOVER \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

AMERICAN EXPRESS \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

JCB \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

My credit card will pay for the following charges (Please Check):

All Charges	<input type="checkbox"/>	Restaurant/Bar	<input type="checkbox"/>
Room/Tax Charges	<input type="checkbox"/>	Laundry	<input type="checkbox"/>
Phone	<input type="checkbox"/>	Movies	<input type="checkbox"/>
<b>Banquet Charges H 457</b>	<input checked="" type="checkbox"/>	Internet Access	<input type="checkbox"/>

Card Holder's Name (Please Print): \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_

Card Holder's Mailing Address: \_\_\_\_\_

Card Holder's Phone No.: \_\_\_\_\_

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

**We ask that you make a clear copy of both sides of the CREDIT CARD and a clear copy of the CARDHOLDER'S DRIVERS LICENSE & FAX ALL BACK TO THE NUMBER ABOVE.**

**\*\*\*Please note that this form is NOT VALID without both copies of the CREDIT CARD and DRIVERS LICENSE\*\*\***