

Billing Authorization

Hotel Equatorial Shanghai
No. 65 West Yanan Road Shanghai
Shanghai 200040
China
Tel: +86 21 62481688

I hereby authorize Hotel Equatorial Shanghai to bill the following.

Name Of Guest _____ Room No. _____

Company Name _____

Arrival Date _____ Departure Date _____

Estimate Amount/No Limit _____

For room, food & beverages, telephones charges and other expenses to my Credit Card.

Names of Credit Card Holder _____ Passport No. _____

Company(If any) _____

Credit Card Number _____ Exp. Date _____

Authorized Signature _____

Hotel Approving Authority _____ Date _____