

5417-6



Hyatt Regency Calgary  
700 Centre Street SE  
Calgary, AB T2G 5P6  
Ph: 403-717-1234  
Fax: 403-537-4444

INFORMATION INVOICE

Payee Donald Back

Room No. 1122  
Arrival 12-05-14  
Departure 12-06-14  
Page No. 1 of 1  
Folio Window 1  
Folio No.

Confirmation No. 5339986201

Group Name

Date	Description	Charges	Credits
12-05-14	# Guest Room	139.00	
12-05-14	* # DMF Levy 3.0%	4.17	
12-05-14	* # Alberta Room Tax 4.0%	5.73	
12-05-14	* # Room - GST 5.0%	7.16	
<b>Total</b>		<b>156.06</b>	<b>0.00</b>

Guest Signature

Balance

156.06

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

Thank you for choosing Hyatt Regency Calgary. Your feedback is very important to us. For any comments regarding your stay, please feel free to contact our Manager on Duty via email at [QualityCALRC@hyatt.com](mailto:QualityCALRC@hyatt.com)

**Hyatt Gold Passport Summary**

No Membership to be credited

For inquiries concerning your bill please call 888-587-4589.

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