

St. Robert, MO. 65584 Phone: 573-336-5050 Fax: 573-336-5045

Cancellat	on Policy:								
Operator	Informatio Don Ric	cks					t. Leonard Wo	ood	
	Name: 97)		Betsy Tho			
	roup: 97tl					139 Carme			
Group Cor	ntact: Don	ina Ct Cu	cks			P St. Robert,			
Address:	3709 Sab Zip: Deca	tur AL 2	=60 2			number: 573- mber: 573-33			
Dhono num	hber: 250	5-202-071	4		riptel lax nui	nber: 3/3-33	0-3043		
Fax numb		303-9/1	*						
rax numb									
Contract	Service:								
Number Room Rate Arrival Date: 2 Oct 14 Departure Date: 5 Oct 14									
of rooms	Type		Check-in Time: 3:00PM Check out time: 12:00 PM NOTE: Group rate is valid from 9-30-14 thru 10-6-14						
	Singles								
	Doubles		Method of Reservation:						
	Kings								
	Suites		Individual Direct						
	Triple								
	Quad								
Total			1						
	Sep 30	Oc	t ı	Oct 2	Oct 3	Oct 4	Oct 5	Oct 6	
Date	ocp o	7	-	-	1 90.0	-		1	
Day					1.				
Rooms					1				
Billing In	struction:		Ror	om & Tax \$7	1.17		Incidentals:		
murvidudi	ray.		100		night		incidentatio.		
Cash:	f Payment:			per	mgnt				
Company Check: CC nun						Exp. Date:			
Name of card holder:			uniber		+	LAP. De			
Name of C	ard noider.								
	l Commen								
	tain the Engineer			ndividual	s calling w	ill state th	ey are par	t of the	

NQQ1= 2 Queen Beds Non-smoking NK1= King, non-smoking BNQ1= Queen Leisure, non-smoking PNK1= Accessible, non-smoking JN1= Jacuzzi, non-smoking

QQ1= 2 Queen, smoking K1= King, smoking BQ1= Queen Leisure, smoking PK1= Accessible, smoking