



08-27-10

michael gabor	Folio No. :	5892	Room No. :	470
	A/R Number :		Arrival :	07-23-08
Maple Heights, Ohio	Group Code :		Departure :	07-24-08
US	Company :		Conf. No. :	3408
	Membership No. :		Rate Code :	IDDSR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
07-23-08	Cash		79.53
07-23-08	*Accommodation	69.00	
07-23-08	Sales Tax	5.35	
07-23-08	Bed Tax	5.18	
Total		79.53	79.53
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Cleveland South
I-77 at 6001 Rockside Road
Independence, OH 44131
Telephone: (216) 524-8050 Fax: (216) 524-9280

**GOVERNMENT
EXHIBIT**

951

1:10CR387

Window



Exit



Reservations



Front Desk



Cashiering

Rooms
Management

AR



Commissions



End of Day



Miscellaneous

New
ReservationUpdate
Reservation

Block



Profiles



Room Plan



Floor Plan



Confirmation



Calendar

CLEIN - Reservation 608833 CHECKED OUT

C

Guest Name
 First / Title
 Phone
 Member Info
 Member Lvl.

Address
 City
 State
 Zip/Country
 VIP

Agent
 Company
 Group
 Source

More Fields

Arrival Wednesday
 Nights
 Departure Thursday
 Adults Child # of Rms.
 Rm. Type RTC:
 Room
 Rate Code ☒ Fixed Rate
 Rate
 Block Code
 Disc. Amt. or Disc. %
 Reason
 Packages

Res. Type Checked In
 Market Discount - D
 Source Guest Direct
 Payment Cash
 Credit Card No.
 Exp. Date
 CC Holder
 Caller Details
 Specials
 Comments
 Tax / Exempt #

CRS No.
 Reference #
 Extra
 Arrival Time
 Item Inv.
 Res. Color
 Confirmation Letter ☐
 No Post ☒ Print Rate ☒
☐ Under Check-out
 Approval Amt.
 Approval Code
 Guest Balance

Comments No Post

Created By MDUNCAN

On 07-22-08

Updated By KMARCELLA

On 07-23-08

Save

OK

Options

Close



08-27-10

michael garbor	Folio No. :	9670	Room No. :	304
	A/R Number :		Arrival :	06-02-08
Maple Heights, OH	Group Code :		Departure :	06-03-08
US	Company :	AAA Rate	Conf. No. :	1234
	Membership No. :		Rate Code :	IDAAA
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
			135.98
06-02-08	Cash		
		117.99	
06-02-08	*Accommodation	9.14	
06-02-08	Sales Tax	8.85	
06-02-08	Bed Tax		
Total		135.98	135.98
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Window



Exit



Reservations



Front Desk



Cashing



Rooms Management



AR



Commissions



End of Day



Miscellaneous

New Reservation

Update Reservation

Blocks

Profiles

Room Plan

Floor Plan

Confirmation

Calendar

CLEIN - Reservation 580425 CHECKED OUT

CI

Guest Name garbor
First / Title michael
Phone
Member Info
Member Lvl.

Address
City Maple Heights
State OH
Zip/County
VIP

Agent
Company
Group
Source

More Fields

Arrival 06-02-08 Monday
Nights 1
Departure 06-03-08 Tuesday
Adults 1 Child 0 # of Rms. 1
Rm. Type
Room
Rate Code
Rate 117.00
Block Code
Disc Amt. or Disc. %
Reason
Packages

Res. Type CHOC + Checked In
Market + Discount - D
Source + Walk-In
Payment + Cash
Credit Card No.
Exp. Date
CC Holder
Caller Details
Specials
Comments
Tax / Exempt #

CRS N 1234
Reference #
Extra
Arrival Time 1:11
Item Inv.
Res. Color
Confirmation Letter
No Post Print Rate
Approval Amt.
Approval Code
Guest Balance 0.00

No Post

Created By ABLAKE

On 06-02-08

Updated By BKUBK

On 06-02-08

Options Close

21:11
9:11 AM



GUEST INFORMATION

Michael Garbor

Maple Heights, OH
US

Email Address:

Opt Out: ☐

I do not wish to receive communications

MEMBERSHIP INFORMATION

Priority Club Enrollment: ☐ Yes ☐ No

Smoking Preference: _____ Bed Type: _____

Preferred Language: _____

RESERVATION INFORMATION

Confirmation No. 1234

Room Type: King with Sofa Bed Non-Smoking Room #: 304

Arrival Date: 06-02-08

Rate Code: IDAAA

Arrival Rate: 117.99 USD

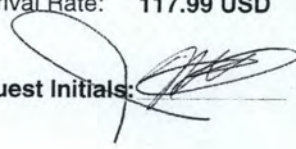
Departure Date: 06-03-08

Group:

Number of Nights: 1

Company: AAA Rate

Number of Guests: 1/0

Guest Initials: 

SETTLEMENT INFORMATION

Payment Method: Cash

If any of the above information is incorrect or incomplete, please use the section below.

Name : _____ Telephone : _____

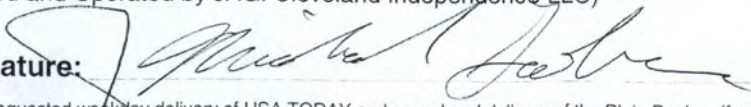
Address : _____

City : _____ State/Prov : _____ Postal Code : _____ Country : _____

Email Address : _____

License Plate # : _____ Make : _____ Model : _____

(Owned and Operated by JAGI Cleveland Independence LLC)

Signature: 

I have requested weekday delivery of USA TODAY and a weekend delivery of the Plain Dealer. If refused, account will be credited \$0.50 or \$0.75 daily or \$1.50 Saturday. This hotel assumes no responsibility for loss of money, jewels, or other valuables, unless placed in our safe deposit boxes located at the Front Desk. The Hotel is not responsible for contents left in room or auto. I agree that my liability for this bill is not waived and 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.

Holiday Inn Cleveland South
I-77 at 6001 Rockside Road
Independence, OH 44131

OHIO

DRIVER LICENSE

250-0

TED STRICKLAND, GOVERNOR

Mike Rankin, Registrar

MICHAEL D GABOR

PARMA, OH

LICENSE NO.

0947

BIRTH DATE

1959

EXPIRES ON

07/19/2011

ISSUE DATE

07/30/2007

Sex HT

M

Endorse

Restr

A

WT

Hair

Eyes

BRO

BLU

Type Two Part

R

ORGAN





Exit



Reservations



Front Desk



Cashing



Rooms Management



AR



Commissions



End of Day



Miscellaneous



New Reservation



Update Reservation



Blocks



Profiles



Room Plan



Floor Plan



Confirmation



Calendar

CLEIN - Reservations - Confirmation No. 566475

Name First Name CRS No

Company Corp No Conf/Cd No

Group Block Mem. Type / No

Source Arrival From Arrival To

Agent IATA No Party

Name	Room	Room Type	Arrival	Departure	Rms	Prs	Status	Group/Company
FORE, KEVIN	530	KNGN	06-02-08	06-05-08	1	1/0	CHECKED OUT	NORTH AMERICA
Funk, Eric	540	KNGN	06-02-08	06-05-08	1	1/0	CHECKED OUT	NORTH AMERICA
garbor, michael	304	KSBN	06-02-08	06-03-08	1	1/0	CHECKED OUT	AAA Rate
Gerwitz, Howard	473	KSBN	06-02-08	06-04-08	1	1/0	CHECKED OUT	
Graber, Larry	240	KSBN	06-02-08	06-03-08	1	1/0	CHECKED OUT	WHEELING & LAK
Grace, Mike	482	KSBN	06-02-08	06-04-08	1	1/0	CHECKED OUT	ARROW UNIFORM
Graham, Herman	303	KSBN	06-02-08	06-07-08	1	2/0	CHECKED OUT	
Greenwell, Brian	463	KSBN	06-02-08	06-03-08	1	1/0	CHECKED OUT	Ccra
greer, debbie	420	TDBN	06-02-08	06-03-08	1	1/0	CHECKED OUT	CLEVELAND CLIN
GREZEK, JERAMY	524	KNGN	06-02-08	06-05-08	1	1/0	CHECKED OUT	NORTH AMERICA
GROSS, ROSEMARIE	244	KSBN	06-02-08	06-03-08	1	1/0	CHECKED OUT	CATERING

Comments

Search

Advanced

Clear

New

Check In

Cancel

Profile

Options

Edit

Close