

BILLING ADDRESS
Name: AWIN MOHAMMED
Phone Number :
Bill Ref : HV6704
Date : 01-08-2026

عنوان المستلم
AWIN MOHAMMED: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
AWIN MOHAMMED	1	20-10-2023	30-10-2023	كوالا لنكاوي سنكل	Nights: 10 BERJAYA TIME SQUARE	Studio	1	0	\$ 850	\$ 850
						TOTAL			\$ 850	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 850	