

BILLING ADDRESS  
Name: FADI JAZRAWI  
Phone Number :  
Bill Ref : HV6705  
Date : 01-10-2026

عنوان المستلم  
FADI JAZRAWI: الاسم

## Invoice / فاتورة

| Name         | Adult | Checkin    | Checkout   | Package      | Hotel                               | R-<br>Type  | R-<br>Qty | Extra<br>bed | Fees    | Total   |
|--------------|-------|------------|------------|--------------|-------------------------------------|-------------|-----------|--------------|---------|---------|
| FADI JAZRAWI | 2     | 16-10-2023 | 25-10-2023 | كوالا لنكاوي | Nights: 9<br>BERJAYA TIME<br>SQUARE | Studio      | 1         | 0            | \$ 535  | \$ 1070 |
|              |       |            |            |              |                                     | TOTAL       |           |              | \$ 1070 |         |
|              |       |            |            |              |                                     | PAYMENT     |           |              | \$ 0    |         |
|              |       |            |            |              |                                     | OUTSTANDING |           |              | \$ 1070 |         |