

BILLING ADDRESS
Name: JEHAD SHEJAEYA
Phone Number :
Bill Ref : HV1331
Date : 01-08-2026

عنوان المستلم
JEHAD SHEJAEYA: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
JEHAD SHEJAEYA	4	04-07-2024	11-07-2024	كوالا لنكاوي	Nights: 7 CAPRI BY FRASER	DELU XE	2	0	\$ 500	\$ 2000
					TOTAL			\$ 2000		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 2000		