

BILLING ADDRESS
Name: MAHMOUD SOMADI
Phone Number :
Bill Ref : HV1397
Date : 02-10-2026

عنوان المستلم
MAHMOUD SOMADI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MAHMOUD SOMADI	2	07-08-2024	15-08-2024	كوالا بوكيت	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 650	\$ 1300
						TOTAL			\$ 1300	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1300	