

BILLING ADDRESS
Name: BAZEL HANTEN
Phone Number :
Bill Ref : HV1538
Date : 30-09-2026

عنوان المستلم
BAZEL HANTEN: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
BAZEL HANTEN	2	16-08-2024	24-08-2024	كوالا لنكاوي	Nights: 8 CAPRI BY FRASER	DELU XE	1	0	\$ 1350	\$ 2700
					TOTAL			\$ 2700		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 2700		