

BILLING ADDRESS
Name: MUNTADHER WITWIT
Phone Number :
Bill Ref : HV1567
Date : 30-09-2026

عنوان المستلم
MUNTADHER WITWIT: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MUNTADHER WITWIT	1	18-08-2024	27-08-2024	كوالا لنكاوي	Nights: 9 BERJAYA TIME SQUARE	Studio	1	0	\$ 825	\$ 825
						TOTAL			\$ 825	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 825	