

BILLING ADDRESS
Name: HASAN AL THAMIREE
Phone Number :
Bill Ref : HV2264
Date : 30-07-2026

عنوان المستلم
HASAN AL THAMIREE: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
HASAN AL THAMIREE	2	27-12-2024	04-01-2025	كوالالمبور لنكاوي	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1300	\$ 2600
						TOTAL			\$ 2600	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2600	