

BILLING ADDRESS
Name: AHMED MOHAMMED
Phone Number :
Bill Ref : HV2588
Date : 02-10-2026

عنوان المستلم
AHMED MOHAMMED: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
AHMED MOHAMMED	1	25-01-2025	08-02-2025	فيلا تاييلند	Nights: 14 BERJAYA TIME SQUARE	Studio	1	0	\$ 50	\$ 50
					TOTAL			\$ 50		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 50		