

BILLING ADDRESS
Name: FIRAS ALBAGHDADI
Phone Number :
Bill Ref : HV2601
Date : 02-10-2026

عنوان المستلم
FIRAS ALBAGHDADI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
FIRAS ALBAGHDADI	1	01-02-2025	15-02-2025	فيلا تايلند	Nights: 14 BERJAYA TIME SQUARE	Studio	1	0	\$ 50	\$ 50
						TOTAL			\$ 50	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 50	