

BILLING ADDRESS
Name: SHAMIL AL AZZAWI
Phone Number :
Bill Ref : HV2935
Date : 03-10-2026

عنوان المستلم
SHAMIL AL AZZAWI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
SHAMIL AL AZZAWI	1	11-04-2025	19-04-2025	KUL ONLY	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1164	\$ 1164
						TOTAL			\$ 1164	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1164	