

BILLING ADDRESS
Name: DABAN ALI, REZA NOORI
Phone Number :
Bill Ref : HV2961
Date : 01-08-2026

عنوان المستلم
DABAN ALI, REZA NOORI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
DABAN ALI, REZA NOORI	2	11-04-2025	19-04-2025	KUL-SABAH	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 0	\$ 0
						TOTAL			\$ 0	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 0	