

BILLING ADDRESS
Name: AHMED OMAR
Phone Number :
Bill Ref : HV2972
Date : 31-07-2026

عنوان المستلم
AHMED OMAR: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AHMED OMAR	2	25-04-2025	03-05-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1100	\$ 2200
						TOTAL			\$ 2200	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2200	