

BILLING ADDRESS
Name: SALAH ALSHAWI
Phone Number :
Bill Ref : HV3006
Date : 01-10-2026

عنوان المستلم
SALAH ALSHAWI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
SALAH ALSHAWI	2	18-04-2025	26-04-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 500	\$ 1000
						TOTAL			\$ 1000	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1000	