

BILLING ADDRESS
Name: OMAR AL HALBOOSI
Phone Number :
Bill Ref : HV3055
Date : 02-10-2026

عنوان المستلم
OMAR AL HALBOOSI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
OMAR AL HALBOOSI	2	19-01-2025	31-01-2025	VISA	Nights: 12 BERJAYA TIME SQUARE	Studio	1	0	\$ 250	\$ 500
						TOTAL			\$ 500	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 500	