

BILLING ADDRESS
Name: MARYAM MAHMOOD
Phone Number :
Bill Ref : HV3173
Date : 02-10-2026

عنوان المستلم
MARYAM MAHMOOD: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MARYAM MAHMOOD	1	05-05-2025	19-05-2025	فيلا بالي	Nights: 14 BERJAYA TIME SQUARE	Studio	1	0	\$ 80	\$ 80
TOTAL									\$ 80	
PAYMENT									\$ 0	
OUTSTANDING									\$ 80	