

BILLING ADDRESS
Name: AHMED ATRASH
Phone Number :
Bill Ref : HV3201
Date : 02-10-2026

عنوان المستلم
AHMED ATRASH: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AHMED ATRASH	3	12-05-2025	20-05-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	2	0	\$ 500	\$ 1500
						TOTAL			\$ 1500	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1500	