

BILLING ADDRESS
Name: IBRAHIM AL KHAF AJI,
Phone Number :
Bill Ref : HV4048
Date : 02-10-2026

عنوان المستلم
IBRAHIM AL KHAF AJI, الاسم:

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
IBRAHIM AL KHAF AJI,	2	25-09-2025	04-10-2025	KUL-LGK	Nights: 9 BERJAYA TIME SQUARE	Studio	1	0	\$ 1164	\$ 2328
						TOTAL			\$ 2328	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2328	