

BILLING ADDRESS
Name: RAED AL ZAIDI
Phone Number :
Bill Ref : HV4053
Date : 02-10-2026

عنوان المستلم
RAED AL ZAIDI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
RAED AL ZAIDI	2	12-09-2025	20-09-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1164	\$ 2328
						TOTAL			\$ 2328	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2328	