

BILLING ADDRESS
Name: HASTYAR MOHAMMED
Phone Number :
Bill Ref : HV4111
Date : 30-09-2026

عنوان المستلم
HASTYAR MOHAMMED: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
HASTYAR MOHAMMED	3	13-09-2025	27-09-2025	فيزة بالي	Nights: 14 BERJAYA TIME SQUARE	Studio	1	0	\$ 85	\$ 255
						TOTAL			\$ 255	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 255	