

BILLING ADDRESS
Name: AHMED AL TAIE
Phone Number :
Bill Ref : HV4249
Date : 01-10-2026

عنوان المستلم
AHMED AL TAIE: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AHMED AL TAIE	2	10-10-2025	18-10-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1164	\$ 2328
TOTAL									\$ 2328	
PAYMENT									\$ 0	
OUTSTANDING									\$ 2328	