

BILLING ADDRESS
Name: SAIFALDIN MUSA
Phone Number :
Bill Ref : HV4266
Date : 01-08-2026

عنوان المستلم
SAIFALDIN MUSA: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
SAIFALDIN MUSA	2	10-10-2025	18-10-2025	KUL-BALI	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1900	\$ 3800
						TOTAL			\$ 3800	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 3800	