

BILLING ADDRESS
Name: ANAS AL NSOUR
Phone Number :
Bill Ref : HV4350
Date : 01-08-2026

عنوان المستلم
ANAS AL NSOUR: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ANAS AL NSOUR	2	15-10-2025	23-10-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1200	\$ 2400
						TOTAL			\$ 2400	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2400	