

BILLING ADDRESS
Name: SAADI TALAL
Phone Number :
Bill Ref : HV4387
Date : 01-08-2026

عنوان المستلم
SAADI TALAL: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
SAADI TALAL	2	04-11-2025	13-11-2025	كروب بانكوك بوكيت	Nights: 9 BERJAYA TIME SQUARE	Studio	1	0	\$ 75	\$ 150
						TOTAL			\$ 150	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 150	