

BILLING ADDRESS
Name: ABBAS AL ZEYADI
Phone Number :
Bill Ref : HV4456
Date : 29-09-2026

عنوان المستلم
ABBAS AL ZEYADI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ABBAS AL ZEYADI	1	31-10-2025	08-11-2025	KUL LAN GKAWI	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 750	\$ 750
						TOTAL			\$ 750	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 750	