

BILLING ADDRESS
Name: ZAID ABU RAGHEEF
Phone Number :
Bill Ref : HV4584
Date : 30-09-2026

عنوان المستلم
ZAID ABU RAGHEEF: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ZAID ABU RAGHEEF	2	21-11-2025	29-11-2025	kul lgk	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1200	\$ 2400
						TOTAL			\$ 2400	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2400	