

BILLING ADDRESS
Name: ALI AL HILFI
Phone Number :
Bill Ref : HV4647
Date : 02-10-2026

عنوان المستلم
الاسم: ALI AL HILFI

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ALI AL HILFI	2	01-12-2025	09-12-2025	KUL LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 500	\$ 1000
						TOTAL			\$ 1000	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1000	