

BILLING ADDRESS
Name: OSAMA AL GBURI
Phone Number :
Bill Ref : HV4697
Date : 31-07-2026

عنوان المستلم
OSAMA AL GBURI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
OSAMA AL GBURI	2	12-12-2025	20-12-2025	KUL LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 475	\$ 950
						TOTAL			\$ 950	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 950	