

BILLING ADDRESS
Name: AMRO HAMED
Phone Number :
Bill Ref : HV4698
Date : 01-08-2026

عنوان المستلم
AMRO HAMED: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AMRO HAMED	1	11-12-2025	18-12-2025	KUL LGK	Nights: 7 BERJAYA TIME SQUARE	Studio	1	0	\$ 700	\$ 700
						TOTAL			\$ 700	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 700	