

BILLING ADDRESS
Name: MUSTAFA AL MINSHID
Phone Number :
Bill Ref : HV4847
Date : 01-10-2026

عنوان المستلم
MUSTAFA AL MINSHID: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
MUSTAFA AL MINSHID	2	31-12-2025	14-01-2026	فيلا بالي عادية	Nights: 14 BERJAYA TIME SQUARE	Studio	1	0	\$ 85	\$ 170
					TOTAL			\$ 170		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 170		