

BILLING ADDRESS
Name: YASIR ALJAMAN
Phone Number :
Bill Ref : HV5039
Date : 30-09-2026

عنوان المستلم
YASIR ALJAMAN: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
YASIR ALJAMAN	2	06-02-2026	14-02-2026	KUL LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1214	\$ 2428
					TOTAL			\$ 2428		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 2428		