

BILLING ADDRESS
Name: KAMAL AL RUBAYE
Phone Number :
Bill Ref : HV5056
Date : 30-09-2026

عنوان المستلم
KAMAL AL RUBAYE: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
KAMAL AL RUBAYE	2	13-02-2026	21-02-2026	KUL BALI	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1050	\$ 2100
طفل	1								\$ 500	\$ 500
						TOTAL			\$ 2600	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2600	