

BILLING ADDRESS
Name: AHMED AL RUBAYE
Phone Number :
Bill Ref : HV5061
Date : 30-09-2026

عنوان المستلم
AHMED AL RUBAYE: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AHMED AL RUBAYE	4	06-02-2026	14-02-2026	KUL LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 525	\$ 2100
						TOTAL			\$ 2100	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2100	