

BILLING ADDRESS
Name: MOHAMMED SHAREA
Phone Number :
Bill Ref : HV2867
Date : 30-09-2026

عنوان المستلم
MOHAMMED SHAREA: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MOHAMMED SHAREA	2	24-11-2018	01-12-2018	برنامج دعوم	Nights: 7 FURAMA HOTEL	Studio	1	0	\$ 270	\$ 540
						TOTAL			\$ 540	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 540	