

BILLING ADDRESS
Name: ALI HUSSEIN
Phone Number :
Bill Ref : HV4307
Date : 29-09-2026

عنوان المستلم
ALI HUSSEIN: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ALI HUSSEIN	2	15-09-2019	25-09-2019	برنامج مدعووم	Nights: 10 FURAMA HOTEL	Studio	1	0	\$ 375	\$ 750
						TOTAL			\$ 750	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 750	