

BILLING ADDRESS
Name: FADHEELAH ALTAIE
Phone Number :
Bill Ref : HV4604
Date : 03-10-2026

عنوان المستلم
FADHEELAH ALTAIE: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
FADHEELAH ALTAIE	2	07-12-2019	15-12-2019	برنامج مدعووم	Nights: 8 FURAMA HOTEL	Studio	1	0	\$ 325	\$ 650
						TOTAL			\$ 650	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 650	