

BILLING ADDRESS
Name: HAMSA THABIT
Phone Number :
Bill Ref : HV6455
Date : 01-10-2026

عنوان المستلم
HAMSA THABIT: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
HAMSA THABIT	1	19-08-2023	28-08-2023	كوالا لنكاوي سنكل	Nights: 9 BERJAYA TIME SQUARE	Studio	1	0	\$ 825	\$ 825
						TOTAL			\$ 825	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 825	