

BILLING ADDRESS
Name: MOHAMMED ALKATANI
Phone Number :
Bill Ref : HV6553
Date : 30-09-2026

عنوان المستلم
MOHAMMED ALKATANI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MOHAMMED ALKATANI	2	23-09-2023	01-10-2023	برنامج كوالا	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 360	\$ 720
						TOTAL			\$ 720	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 720	