

BILLING ADDRESS
Name: AHMAD ALELAIMAT
Phone Number :
Bill Ref : HV6612
Date : 30-09-2026

عنوان المستلم
AHMAD ALELAIMAT: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
AHMAD ALELAIMAT	2	24-09-2023	03-10-2023	كوالا لنكاوي	Nights: 9 BERJAYA TIME SQUARE	Studio	1	0	\$ 510	\$ 1020
					TOTAL			\$ 1020		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 1020		