

BILLING ADDRESS
Name: SAIF HUSSEIN
Phone Number :
Bill Ref : HV6796
Date : 01-10-2026

عنوان المستلم
SAIF HUSSEIN: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
SAIF HUSSEIN	2	29-11-2023	12-12-2023	كوالا لنكاوي بينانك	Nights: 13 BERJAYA TIME SQUARE	Studio	1	0	\$ 755	\$ 1510
						TOTAL			\$ 1510	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1510	