

BILLING ADDRESS  
Name: OMAR ALDOORI  
Phone Number :  
Bill Ref : HV565  
Date : 02-08-2026

عنوان المستلم  
OMAR ALDOORI: الاسم

## Invoice / فاتورة

| Name         | Adult | Checkin    | Checkout   | Package      | Hotel                                | R-<br>Type  | R-<br>Qty | Extra<br>bed | Fees    | Total   |
|--------------|-------|------------|------------|--------------|--------------------------------------|-------------|-----------|--------------|---------|---------|
| OMAR ALDOORI | 2     | 11-02-2024 | 22-02-2024 | كوالا لنكاوي | Nights: 11<br>BERJAYA TIME<br>SQUARE | Studio      | 1         | 0            | \$ 585  | \$ 1170 |
|              |       |            |            |              |                                      | TOTAL       |           |              | \$ 1170 |         |
|              |       |            |            |              |                                      | PAYMENT     |           |              | \$ 0    |         |
|              |       |            |            |              |                                      | OUTSTANDING |           |              | \$ 1170 |         |