

BILLING ADDRESS
Name: HUTHAIFA ABU SERHAN
Phone Number :
Bill Ref : HV1369
Date : 01-10-2026

عنوان المستلم
HUTHAIFA ABU SERHAN: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
HUTHAIFA ABU SERHAN	2	13-07-2024	20-07-2024	كوالا لنكاوي	Nights: 7 BERJAYA TIME SQUARE	DELU XE	1	0	\$ 500	\$ 1000
						TOTAL			\$ 1000	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1000	