

BILLING ADDRESS
Name: AHMED ALGBURI
Phone Number :
Bill Ref : HV1514
Date : 02-10-2026

عنوان المستلم
AHMED ALGBURI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AHMED ALGBURI	2	09-08-2024	17-08-2024	كوالا بوكيت	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1425	\$ 2850
						TOTAL			\$ 2850	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2850	