

BILLING ADDRESS  
Name: MUSTAFA ALWARD  
Phone Number :  
Bill Ref : HV1876  
Date : 30-09-2026

عنوان المستلم  
MUSTAFA ALWARD: الاسم

## Invoice / فاتورة

| Name           | Adult | Checkin    | Checkout   | Package   | Hotel                                | R-<br>Type  | R-<br>Qty | Extra<br>bed | Fees   | Total  |
|----------------|-------|------------|------------|-----------|--------------------------------------|-------------|-----------|--------------|--------|--------|
| MUSTAFA ALWARD | 2     | 29-09-2024 | 14-10-2024 | فيزة بالي | Nights: 15<br>BERJAYA TIME<br>SQUARE | Studio      | 1         | 0            | \$ 125 | \$ 250 |
|                |       |            |            |           |                                      | TOTAL       |           |              | \$ 250 |        |
|                |       |            |            |           |                                      | PAYMENT     |           |              | \$ 0   |        |
|                |       |            |            |           |                                      | OUTSTANDING |           |              | \$ 250 |        |