

BILLING ADDRESS
Name: AHMED ALJAMEEL
Phone Number :
Bill Ref : HV2523
Date : 01-10-2026

عنوان المستلم
AHMED ALJAMEEL: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
AHMED ALJAMEEL	2	31-01-2025	08-02-2025	كوالا بالي	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1700	\$ 3400
TOTAL									\$ 3400	
PAYMENT									\$ 0	
OUTSTANDING									\$ 3400	