

BILLING ADDRESS
Name: AL HAKAM SABRI
Phone Number :
Bill Ref : HV2657
Date : 30-09-2026

عنوان المستلم
AL HAKAM SABRI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AL HAKAM SABRI	2	14-02-2025	22-02-2025	KUL-SING APORE	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1450	\$ 2900
						TOTAL			\$ 2900	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2900	