

BILLING ADDRESS
Name: MOHAMMED AL SAADI
Phone Number :
Bill Ref : HV2858
Date : 30-09-2026

عنوان المستلم
MOHAMMED AL SAADI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MOHAMMED AL SAADI	1	20-03-2025	31-03-2025	فيلا تاياند	Nights: 11 BERJAYA TIME SQUARE	Studio	1	0	\$ 55	\$ 55
						TOTAL			\$ 55	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 55	