

BILLING ADDRESS
Name: ABDULMOMEN ALTEKRETI
Phone Number :
Bill Ref : HV2921
Date : 02-10-2026

عنوان المستلم
ABDULMOMEN ALTEKRETI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ABDULMOMEN ALTEKRETI	2	11-04-2025	19-04-2025	KUL-LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1078	\$ 2156
						TOTAL			\$ 2156	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2156	