

BILLING ADDRESS
Name: ABEDALAZIZ AL ISSA
Phone Number :
Bill Ref : HV3133
Date : 01-10-2026

عنوان المستلم
ABEDALAZIZ AL ISSA: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ABEDALAZIZ AL ISSA	2	06-05-2025	11-05-2025	KUL ONLY	Nights: 5 BERJAYA TIME SQUARE	Studio	1	0	\$ 600	\$ 1200
						TOTAL			\$ 1200	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1200	