

BILLING ADDRESS
Name: MUAYAD ZERJAWI
Phone Number :
Bill Ref : HV3474
Date : 01-10-2026

عنوان المستلم
MUAYAD ZERJAWI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MUAYAD ZERJAWI	4	13-06-2025	21-06-2025	KUL ONLY	Nights: 8 BERJAYA TIME SQUARE	Studio	2	0	\$ 1056	\$ 4224
						TOTAL			\$ 4224	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 4224	