

BILLING ADDRESS
Name: ABBAS ZAIDAWI
Phone Number :
Bill Ref : HV3657
Date : 31-07-2026

عنوان المستلم
ABBAS ZAIDAWI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ABBAS ZAIDAWI	2	01-08-2025	09-08-2025	KUL ONLY	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1045	\$ 2090
						TOTAL			\$ 2090	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 2090	