

BILLING ADDRESS
Name: IBRAHIM ALTAHER
Phone Number :
Bill Ref : HV4076
Date : 30-09-2026

عنوان المستلم
IBRAHIM ALTAHER: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
IBRAHIM ALTAHER	1	20-09-2025	27-09-2025	KUL-LGK	Nights: 7 BERJAYA TIME SQUARE	Studio	1	0	\$ 700	\$ 700
						TOTAL			\$ 700	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 700	