

BILLING ADDRESS
Name: MOHAMMED HASAKA
Phone Number :
Bill Ref : HV4148
Date : 31-07-2026

عنوان المستلم
MOHAMMED HASAKA: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
MOHAMMED HASAKA	2	23-09-2025	30-09-2025	فيزة بالي	Nights: 7 BERJAYA TIME SQUARE	Studio	1	0	\$ 85	\$ 170
						TOTAL			\$ 170	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 170	