

BILLING ADDRESS
Name: AHMED AKRM
Phone Number :
Bill Ref : HV4270
Date : 29-09-2026

عنوان المستلم
AHMED AKRM: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
AHMED AKRM	2	10-10-2025	18-10-2025	KUL-BALI	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1615	\$ 3230
						TOTAL			\$ 3230	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 3230	