

BILLING ADDRESS
Name: AHMED AL OMAIRI
Phone Number :
Bill Ref : HV4801
Date : 01-10-2026

عنوان المستلم
الاسم: AHMED AL OMAIRI

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
AHMED AL OMAIRI	2	26-12-2025	03-01-2026	KUL LGK	Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 1500	\$ 3000
					TOTAL			\$ 3000		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 3000		