

BILLING ADDRESS
Name: OMAR KHATIB
Phone Number :
Bill Ref : HV4871
Date : 30-09-2026

عنوان المستلم
OMAR KHATIB: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
OMAR KHATIB	2	08-01-2026	18-01-2026	KUL LGK	Nights: 10 BERJAYA TIME SQUARE	Studio	1	0	\$ 500	\$ 1000
طفل	2								\$ 400	\$ 800
						TOTAL			\$ 1800	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1800	