

BILLING ADDRESS
Name: OMAR AL ABBOODI
Phone Number :
Bill Ref : HV4905
Date : 31-07-2026

عنوان المستلم
OMAR AL ABBOODI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
OMAR AL ABBOODI	2	24-01-2026	31-01-2026	BGK PHU	Nights: 7 ROYAL BENJA	DELU X	1	0	\$ 600	\$ 1200
						TOTAL			\$ 1200	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 1200	