

BILLING ADDRESS
Name: WALEED ALMUKHTAR
Phone Number :
Bill Ref : HV5088
Date : 01-10-2026

عنوان المستلم
WALEED ALMUKHTAR: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
WALEED ALMUKHTAR	1	20-02-2026	28-02-2026	TICKET ONLY	Nights: 8 TICKET ONLY	TICKET ONLY	1	0	\$ 750	\$ 750
					TOTAL			\$ 750		
					PAYMENT			\$ 0		
					OUTSTANDING			\$ 750		