

BILLING ADDRESS
Name: ALAA ALAZZAWI
Phone Number :
Bill Ref : HV3008
Date : 01-08-2026

عنوان المستلم
ALAA ALAZZAWI: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
ALAA ALAZZAWI	1	29-12-2018	05-01-2019	كوالا - لنكاوي	Nights: 7 BERJAYA TIME SQUARE	Studio	1	0	\$ 570	\$ 570
						TOTAL			\$ 570	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 570	