

BILLING ADDRESS
Name: OMAR HASHIM
Phone Number :
Bill Ref : HV3907
Date : 31-07-2026

عنوان المستلم
OMAR HASHIM: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R- Type	R- Qty	Extra bed	Fees	Total
OMAR HASHIM	2	21-07-2019	29-07-2019		Nights: 8 BERJAYA TIME SQUARE	Studio	1	0	\$ 415	\$ 830
						TOTAL			\$ 830	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 830	