

BILLING ADDRESS
Name: BROURAOU HOCINE
Phone Number :
Bill Ref : HV4005
Date : 30-09-2026

عنوان المستلم
BROURAOU HOCINE: الاسم

Invoice / فاتورة

Name	Adult	Checkin	Checkout	Package	Hotel	R-Type	R-Qty	Extra bed	Fees	Total
BROURAOU HOCINE	1	15-08-2019	20-08-2019	كوالا فقط	Nights: 5 BERJAYA TIME SQUARE	Studio	1	0	\$ 400	\$ 400
						TOTAL			\$ 400	
						PAYMENT			\$ 0	
						OUTSTANDING			\$ 400	