

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1	00045153	12/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2	00045154	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3	00045155	12/01/2017	\$20.00	\$7.00	\$27.00	\$0.00	\$0.00	\$27.00	
4	00045156	12/01/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
5	00045157	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
6	00045158	12/01/2017	\$10.00	\$35.00	\$45.00	\$0.00	\$0.00	\$45.00	
7	00045159	12/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
8	00045160	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
9	00045161	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
10	00045162	12/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
11	00045163	12/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
12	00045164	12/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
13	00045165	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
14	00045166	12/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
15	00045167	12/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
16	00045168	12/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
17	00045169	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
18	00045170	12/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
19	00045171	12/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
20	00045172	12/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
21	00045173	12/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
22	00045174	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
23	00045175	12/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
24	00045176	12/01/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
25	00045177	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
26	00045178	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

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			Consult Fee	Medicine Fee					
27	00045179	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
28	00045180	12/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
29	00045181	12/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
30	00045182	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
31	00045183	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
32	00045184	12/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
33	00045185	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
34	00045186	12/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
35	00045187	12/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
36	00045188	12/01/2017	\$110.00	\$18.00	\$128.00	\$0.00	\$0.00	\$128.00	
37	00045189	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
38	00045190	12/01/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
39	00045191	12/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
40	00045192	12/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
41	00045193	12/01/2017	\$30.00	\$20.00	\$50.00	\$0.00	\$0.00	\$50.00	
42	00045194	12/01/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
43	00045195	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
44	00045196	12/01/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
45	00045197	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
46	00045198	12/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
47	00045199	12/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
48	00045200	12/01/2017	\$37.00	\$5.00	\$42.00	\$0.00	\$0.00	\$42.00	
49	00045201	12/01/2017	\$12.00	\$12.00	\$24.00	\$0.00	\$0.00	\$24.00	
50	00045202	12/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
51	00045203	12/01/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
52	00045204	12/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
53	00045205	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
54	00045206	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
55	00045207	12/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
56	00045208	12/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
57	00045209	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
58	00045210	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
59	00045211	12/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
60	00045212	12/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
61	00045213	12/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
62	00045214	12/01/2017	\$11.50	\$3.00	\$14.50	\$0.00	\$0.00	\$14.50	
63	00045215	12/01/2017	\$32.00	\$4.00	\$36.00	\$0.00	\$0.00	\$36.00	
64	00045216	12/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
65	00045217	12/01/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
66	00045218	12/01/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
67	00045219	12/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
68	00045220	12/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
69	00045221	12/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
70	00045222	12/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
71	00045223	12/01/2017	\$0.00	\$185.00	\$185.00	\$0.00	\$0.00	\$185.00	
72	00045224	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
73	00045225	13/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
74	00045226	13/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
75	00045227	13/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
76	00045228	13/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
77	00045229	13/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
78	00045230	13/01/2017	\$10.00	\$40.00	\$50.00	\$0.00	\$0.00	\$50.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
79	00045231	13/01/2017	\$0.00	\$70.00	\$70.00	\$0.00	\$0.00	\$70.00	
80	00045232	13/01/2017	\$0.00	\$2.00	\$2.00	\$0.00	\$0.00	\$2.00	
81	00045233	13/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
82	00045234	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
83	00045235	13/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
84	00045236	13/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
85	00045237	13/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
86	00045238	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
87	00045239	13/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
88	00045240	13/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
89	00045241	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
90	00045242	13/01/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
91	00045243	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
92	00045244	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
93	00045245	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
94	00045246	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
95	00045247	13/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
96	00045248	13/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
97	00045249	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
98	00045250	13/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
99	00045251	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
100	00045252	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
101	00045253	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
102	00045254	13/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
103	00045255	13/01/2017	\$10.00	\$12.50	\$22.50	\$0.00	\$0.00	\$22.50	
104	00045256	13/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
105	00045257	13/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
106	00045258	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
107	00045259	13/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
108	00045260	13/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
109	00045261	13/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
110	00045262	13/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
111	00045263	13/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
112	00045264	13/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
113	00045265	13/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
114	00045266	13/01/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
115	00045267	13/01/2017	\$35.00	\$10.00	\$45.00	\$0.00	\$0.00	\$45.00	
116	00045268	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
117	00045269	13/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
118	00045270	13/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
119	00045271	13/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
120	00045272	13/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
121	00045273	13/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
122	00045274	13/01/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	
123	00045275	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
124	00045276	13/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
125	00045277	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
126	00045278	13/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
127	00045279	13/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
128	00045280	13/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
129	00045281	13/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
130	00045282	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
131	00045283	13/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
132	00045284	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
133	00045285	13/01/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
134	00045286	13/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
135	00045287	13/01/2017	\$0.00	\$7.00	\$7.00	\$7.00	\$0.00	\$0.00	
136	00045288	13/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
137	00045289	13/01/2017	\$10.00	\$17.00	\$27.00	\$2.00	\$0.00	\$25.00	
138	00045290	13/01/2017	\$10.00	\$36.00	\$46.00	\$0.00	\$0.00	\$46.00	
139	00045291	13/01/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
140	00045292	13/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
141	00045293	13/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
142	00045294	13/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
143	00045295	13/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
144	00045296	13/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
145	00045297	13/01/2017	\$0.00	\$121.00	\$121.00	\$0.00	\$0.00	\$121.00	
146	00045298	13/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
147	00045299	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
148	00045300	14/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
149	00045301	14/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
150	00045302	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
151	00045303	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
152	00045304	14/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
153	00045305	14/01/2017	\$13.50	\$8.00	\$21.50	\$0.00	\$0.00	\$21.50	
154	00045306	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
155	00045307	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
156	00045308	14/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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157	00045309	14/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
158	00045310	14/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
159	00045311	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
160	00045312	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
161	00045313	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
162	00045314	14/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
163	00045315	14/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
164	00045316	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
165	00045317	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
166	00045318	14/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
167	00045319	14/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
168	00045320	14/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
169	00045321	14/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
170	00045322	14/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
171	00045323	14/01/2017	\$30.00	\$12.60	\$42.60	\$0.00	\$0.00	\$42.60	
172	00045324	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
173	00045325	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
174	00045326	14/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
175	00045327	14/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
176	00045328	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
177	00045329	14/01/2017	\$35.00	\$28.00	\$63.00	\$0.00	\$0.00	\$63.00	
178	00045330	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
179	00045331	14/01/2017	\$430.00	\$5.00	\$435.00	\$0.00	\$0.00	\$435.00	
180	00045332	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
181	00045333	14/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
182	00045334	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
183	00045335	14/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
184	00045336	14/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
185	00045337	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
186	00045338	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
187	00045339	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
188	00045340	14/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
189	00045341	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
190	00045342	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
191	00045343	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
192	00045344	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
193	00045345	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
194	00045346	14/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
195	00045347	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
196	00045348	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
197	00045349	14/01/2017	\$15.00	\$9.00	\$24.00	\$0.00	\$0.00	\$24.00	
198	00045350	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
199	00045351	14/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
200	00045352	14/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
201	00045353	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
202	00045354	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
203	00045355	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
204	00045356	14/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
205	00045357	14/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
206	00045358	14/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
207	00045359	14/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
208	00045360	14/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
209	00045361	14/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
210	00045362	14/01/2017	\$30.00	\$3.00	\$33.00	\$0.00	\$0.00	\$33.00	
211	00045363	14/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
212	00045364	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
213	00045365	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
214	00045366	14/01/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
215	00045367	14/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
216	00045368	14/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
217	00045369	14/01/2017	\$15.00	\$20.00	\$35.00	\$0.00	\$0.00	\$35.00	
218	00045370	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
219	00045371	14/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
220	00045372	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
221	00045373	14/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
222	00045374	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
223	00045375	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
224	00045376	14/01/2017	\$224.00	\$5.00	\$229.00	\$0.00	\$0.00	\$229.00	
225	00045377	14/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
226	00045378	14/01/2017	\$110.00	\$5.00	\$115.00	\$0.00	\$0.00	\$115.00	
227	00045379	14/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
228	00045380	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
229	00045381	14/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
230	00045382	14/01/2017	\$11.50	\$11.00	\$22.50	\$0.00	\$0.00	\$22.50	
231	00045383	14/01/2017	\$12.00	\$4.00	\$16.00	\$0.00	\$0.00	\$16.00	
232	00045384	14/01/2017	\$15.00	\$8.00	\$23.00	\$0.00	\$0.00	\$23.00	
233	00045385	14/01/2017	\$30.00	\$10.00	\$40.00	\$0.00	\$0.00	\$40.00	
234	00045386	14/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
235	00045387	14/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
236	00045388	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
237	00045389	14/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
238	00045390	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
239	00045391	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
240	00045392	14/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
241	00045393	14/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
242	00045394	14/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
243	00045395	14/01/2017	\$32.00	\$0.00	\$32.00	\$0.00	\$0.00	\$32.00	
244	00045396	14/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
245	00045397	15/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
246	00045398	15/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
247	00045399	15/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
248	00045400	15/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
249	00045401	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
250	00045402	15/01/2017	\$10.00	\$31.50	\$41.50	\$0.00	\$0.00	\$41.50	
251	00045403	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
252	00045404	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
253	00045405	15/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
254	00045406	15/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
255	00045407	15/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
256	00045408	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
257	00045409	15/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
258	00045410	15/01/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
259	00045411	15/01/2017	\$130.00	\$12.00	\$142.00	\$0.00	\$0.00	\$142.00	
260	00045412	15/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
261	00045413	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
262	00045414	15/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
263	00045415	15/01/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
264	00045416	15/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
265	00045417	15/01/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
266	00045418	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
267	00045419	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
268	00045420	15/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
269	00045421	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
270	00045422	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
271	00045423	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
272	00045424	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
273	00045425	15/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
274	00045426	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
275	00045427	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
276	00045428	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
277	00045429	15/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
278	00045430	15/01/2017	\$11.50	\$6.00	\$17.50	\$0.00	\$0.00	\$17.50	
279	00045431	15/01/2017	\$11.50	\$11.00	\$22.50	\$0.00	\$0.00	\$22.50	
280	00045432	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
281	00045433	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
282	00045434	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
283	00045435	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
284	00045436	15/01/2017	\$160.00	\$8.00	\$168.00	\$0.00	\$0.00	\$168.00	
285	00045437	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
286	00045438	15/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
287	00045439	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
288	00045440	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
289	00045441	15/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
290	00045442	15/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
291	00045443	15/01/2017	\$11.50	\$5.00	\$16.50	\$0.00	\$0.00	\$16.50	
292	00045444	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
293	00045445	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
294	00045446	15/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
295	00045447	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
296	00045448	15/01/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
297	00045449	15/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
298	00045450	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
299	00045451	15/01/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
300	00045452	15/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
301	00045453	15/01/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
302	00045454	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
303	00045455	15/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
304	00045456	15/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
305	00045457	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
306	00045458	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
307	00045459	15/01/2017	\$2.50	\$5.00	\$7.50	\$0.00	\$0.00	\$7.50	
308	00045460	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
309	00045461	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
310	00045462	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
311	00045463	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
312	00045464	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
313	00045465	15/01/2017	\$0.00	\$1.50	\$1.50	\$0.00	\$0.00	\$1.50	
314	00045466	15/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
315	00045467	15/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
316	00045468	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
317	00045469	15/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
318	00045470	15/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
319	00045471	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
320	00045472	15/01/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
321	00045473	15/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
322	00045474	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
323	00045475	15/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
324	00045476	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
325	00045477	15/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
326	00045478	15/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
327	00045479	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
328	00045480	15/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
329	00045481	15/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
330	00045482	15/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
331	00045483	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
332	00045484	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
333	00045485	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
334	00045486	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
335	00045487	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
336	00045488	15/01/2017	\$30.00	\$8.00	\$38.00	\$0.00	\$0.00	\$38.00	
337	00045489	15/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
338	00045490	15/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
339	00045491	15/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
340	00045492	15/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
341	00045493	15/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
342	00045494	15/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
343	00045495	15/01/2017	\$0.00	\$144.00	\$144.00	\$0.00	\$0.00	\$144.00	
344	00045496	16/01/2017	\$10.00	\$53.00	\$63.00	\$0.00	\$0.00	\$63.00	
345	00045497	16/01/2017	\$20.00	\$12.00	\$32.00	\$0.00	\$0.00	\$32.00	
346	00045498	16/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
347	00045499	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
348	00045500	16/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
349	00045501	16/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
350	00045502	16/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
351	00045503	16/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
352	00045504	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
353	00045505	16/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
354	00045506	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
355	00045507	16/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
356	00045508	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
357	00045509	16/01/2017	\$15.00	\$0.00	\$15.00	\$0.00	\$0.00	\$15.00	
358	00045510	16/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
359	00045511	16/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
360	00045512	16/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
361	00045513	16/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
362	00045514	16/01/2017	\$10.00	\$73.00	\$83.00	\$0.00	\$0.00	\$83.00	
363	00045515	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
364	00045516	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
365	00045517	16/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
366	00045518	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
367	00045519	16/01/2017	\$110.00	\$8.00	\$118.00	\$0.00	\$0.00	\$118.00	
368	00045520	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
369	00045521	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
370	00045522	16/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
371	00045523	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
372	00045524	16/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
373	00045525	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
374	00045526	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
375	00045527	16/01/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
376	00045528	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
377	00045529	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
378	00045530	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
379	00045531	16/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
380	00045532	16/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
381	00045533	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
382	00045534	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
383	00045535	16/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
384	00045536	16/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
385	00045537	16/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
386	00045538	16/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
387	00045539	16/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
388	00045540	16/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
389	00045541	16/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
390	00045542	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
391	00045543	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
392	00045544	16/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
393	00045545	16/01/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
394	00045546	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
395	00045547	16/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
396	00045548	16/01/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
397	00045549	16/01/2017	\$15.00	\$6.00	\$21.00	\$0.00	\$0.00	\$21.00	
398	00045550	16/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
399	00045551	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
400	00045552	16/01/2017	\$10.00	\$23.00	\$33.00	\$0.00	\$0.00	\$33.00	
401	00045553	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
402	00045554	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
403	00045555	16/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
404	00045556	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
405	00045557	16/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
406	00045558	16/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
407	00045559	16/01/2017	\$25.00	\$11.00	\$36.00	\$0.00	\$0.00	\$36.00	
408	00045560	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
409	00045561	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
410	00045562	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
411	00045563	16/01/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
412	00045564	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
413	00045565	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
414	00045566	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
415	00045567	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
416	00045568	16/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
417	00045569	16/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
418	00045570	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
419	00045571	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
420	00045572	16/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
421	00045573	16/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
422	00045574	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
423	00045575	16/01/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
424	00045576	16/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
425	00045577	16/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
426	00045578	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
427	00045579	16/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
428	00045580	16/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
429	00045581	16/01/2017	\$0.00	\$259.00	\$259.00	\$0.00	\$0.00	\$259.00	
430	00045582	17/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
431	00045583	17/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
432	00045584	17/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
433	00045585	17/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
434	00045586	17/01/2017	\$0.00	\$1.00	\$1.00	\$0.00	\$0.00	\$1.00	
435	00045587	17/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
436	00045588	17/01/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
437	00045589	17/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
438	00045590	17/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
439	00045591	17/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
440	00045592	17/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
441	00045593	17/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
442	00045594	17/01/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
443	00045595	17/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
444	00045596	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
445	00045597	17/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
446	00045598	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
447	00045599	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
448	00045600	17/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
449	00045601	17/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
450	00045602	17/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
451	00045603	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
452	00045604	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
453	00045605	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
454	00045606	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
455	00045607	17/01/2017	\$15.00	\$9.00	\$24.00	\$0.00	\$0.00	\$24.00	
456	00045608	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
457	00045609	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
458	00045610	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
459	00045611	17/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
460	00045612	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
461	00045613	17/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
462	00045614	17/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
463	00045615	17/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
464	00045616	17/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
465	00045617	17/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
466	00045618	17/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
467	00045619	17/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
468	00045620	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
469	00045621	17/01/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
470	00045622	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
471	00045623	17/01/2017	\$10.00	\$5.50	\$15.50	\$0.00	\$0.00	\$15.50	
472	00045624	17/01/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
473	00045625	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
474	00045626	17/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
475	00045627	17/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
476	00045628	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
477	00045629	17/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
478	00045630	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
479	00045631	17/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
480	00045632	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
481	00045633	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
482	00045634	17/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
483	00045635	17/01/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
484	00045636	17/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
485	00045637	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
486	00045638	17/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
487	00045639	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
488	00045640	17/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
489	00045641	17/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
490	00045642	17/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
491	00045643	17/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
492	00045644	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
493	00045645	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
494	00045646	17/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
495	00045647	17/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
496	00045648	17/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
497	00045649	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
498	00045650	17/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
499	00045651	17/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
500	00045652	17/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
501	00045653	17/01/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
502	00045654	17/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
503	00045655	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
504	00045656	17/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
505	00045657	17/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
506	00045658	17/01/2017	\$0.00	\$1.00	\$1.00	\$0.00	\$0.00	\$1.00	
507	00045659	17/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
508	00045660	17/01/2017	\$30.00	\$11.00	\$41.00	\$0.00	\$0.00	\$41.00	
509	00045661	17/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
510	00045662	17/01/2017	\$0.00	\$145.00	\$145.00	\$0.00	\$0.00	\$145.00	
511	00045663	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
512	00045664	18/01/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
513	00045665	18/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
514	00045666	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
515	00045667	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
516	00045668	18/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
517	00045669	18/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
518	00045670	18/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
519	00045671	18/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
520	00045672	18/01/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
521	00045673	18/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
522	00045674	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
523	00045675	18/01/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
524	00045676	18/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
525	00045677	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
526	00045678	18/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
527	00045679	18/01/2017	\$110.00	\$7.00	\$117.00	\$0.00	\$0.00	\$117.00	
528	00045680	18/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
529	00045681	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
530	00045682	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
531	00045683	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
532	00045684	18/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
533	00045685	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
534	00045686	18/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
535	00045687	18/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
536	00045688	18/01/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
537	00045689	18/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
538	00045690	18/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
539	00045691	18/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
540	00045692	18/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
541	00045693	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
542	00045694	18/01/2017	\$12.00	\$6.00	\$18.00	\$0.00	\$0.00	\$18.00	
543	00045695	18/01/2017	\$40.00	\$4.00	\$44.00	\$0.00	\$0.00	\$44.00	
544	00045696	18/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
545	00045697	18/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
546	00045698	18/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
547	00045699	18/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
548	00045700	18/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
549	00045701	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
550	00045702	18/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
551	00045703	18/01/2017	\$15.00	\$6.00	\$21.00	\$0.00	\$0.00	\$21.00	
552	00045704	18/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
553	00045705	18/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
554	00045706	18/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
555	00045707	18/01/2017	\$11.50	\$6.00	\$17.50	\$0.00	\$0.00	\$17.50	
556	00045708	18/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
557	00045709	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
558	00045710	18/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
559	00045711	18/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
560	00045712	18/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
561	00045713	18/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
562	00045714	18/01/2017	\$20.00	\$21.00	\$41.00	\$0.00	\$0.00	\$41.00	
563	00045715	18/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
564	00045716	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
565	00045717	18/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
566	00045718	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
567	00045719	18/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
568	00045720	18/01/2017	\$110.00	\$8.00	\$118.00	\$0.00	\$0.00	\$118.00	
569	00045721	18/01/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
570	00045722	18/01/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
571	00045723	18/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
572	00045724	18/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
573	00045725	18/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
574	00045726	18/01/2017	\$0.00	\$9.00	\$9.00	\$0.00	\$0.00	\$9.00	
575	00045727	18/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
576	00045728	18/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
577	00045729	18/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
578	00045730	18/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
579	00045731	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
580	00045732	18/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
581	00045733	18/01/2017	\$25.00	\$23.00	\$48.00	\$2.00	\$0.00	\$46.00	
582	00045734	18/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
583	00045735	18/01/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
584	00045736	18/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
585	00045737	18/01/2017	\$0.00	\$183.00	\$183.00	\$0.00	\$0.00	\$183.00	
586	00045738	18/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
587	00045739	18/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
588	00045740	18/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
589	00045741	18/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
590	00045742	18/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
591	00045743	19/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
592	00045744	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
593	00045745	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
594	00045746	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
595	00045747	19/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
596	00045748	19/01/2017	\$0.00	\$16.00	\$16.00	\$0.00	\$0.00	\$16.00	
597	00045749	19/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
598	00045750	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
599	00045751	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
600	00045752	19/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
601	00045753	19/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
602	00045754	19/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
603	00045755	19/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
604	00045756	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
605	00045757	19/01/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
606	00045758	19/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
607	00045759	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
608	00045760	19/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
609	00045761	19/01/2017	\$15.00	\$1.00	\$16.00	\$0.00	\$0.00	\$16.00	
610	00045762	19/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
611	00045763	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
612	00045764	19/01/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
613	00045765	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
614	00045766	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
615	00045767	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
616	00045768	19/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
617	00045769	19/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
618	00045770	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
619	00045771	19/01/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
620	00045772	19/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
621	00045773	19/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
622	00045774	19/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
623	00045775	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
624	00045776	19/01/2017	\$55.00	\$29.00	\$84.00	\$0.00	\$0.00	\$84.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
625	00045777	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
626	00045778	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
627	00045779	19/01/2017	\$35.00	\$16.00	\$51.00	\$0.00	\$0.00	\$51.00	
628	00045780	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
629	00045781	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
630	00045782	19/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
631	00045783	19/01/2017	\$40.00	\$15.00	\$55.00	\$0.00	\$0.00	\$55.00	
632	00045784	19/01/2017	\$110.00	\$5.00	\$115.00	\$0.00	\$0.00	\$115.00	
633	00045785	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
634	00045786	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
635	00045787	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
636	00045788	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
637	00045789	19/01/2017	\$10.00	\$7.50	\$17.50	\$0.00	\$0.00	\$17.50	
638	00045790	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
639	00045791	19/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
640	00045792	19/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
641	00045793	19/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
642	00045794	19/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
643	00045795	19/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
644	00045796	19/01/2017	\$25.00	\$24.00	\$49.00	\$0.00	\$0.00	\$49.00	
645	00045797	19/01/2017	\$40.00	\$5.00	\$45.00	\$0.00	\$0.00	\$45.00	
646	00045798	19/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
647	00045799	19/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
648	00045800	19/01/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
649	00045801	19/01/2017	\$0.00	\$15.00	\$15.00	\$0.00	\$0.00	\$15.00	
650	00045802	19/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
651	00045803	19/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
652	00045804	19/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
653	00045805	19/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
654	00045806	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
655	00045807	19/01/2017	\$160.00	\$21.00	\$181.00	\$0.00	\$0.00	\$181.00	
656	00045808	19/01/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
657	00045809	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
658	00045810	19/01/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
659	00045811	19/01/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
660	00045812	19/01/2017	\$10.00	\$4.20	\$14.20	\$0.20	\$0.00	\$14.00	
661	00045813	19/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
662	00045814	19/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
663	00045815	20/01/2017	\$0.00	\$55.00	\$55.00	\$0.00	\$0.00	\$55.00	
664	00045816	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
665	00045817	20/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
666	00045818	20/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
667	00045819	20/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
668	00045820	20/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
669	00045821	20/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
670	00045822	20/01/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
671	00045823	20/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
672	00045824	20/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
673	00045825	20/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
674	00045826	20/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
675	00045827	20/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
676	00045828	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
677	00045829	20/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
678	00045830	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
679	00045831	20/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
680	00045832	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
681	00045833	20/01/2017	\$12.00	\$7.00	\$19.00	\$0.00	\$0.00	\$19.00	
682	00045834	20/01/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	
683	00045835	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
684	00045836	20/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
685	00045837	20/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
686	00045838	20/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
687	00045839	20/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
688	00045840	20/01/2017	\$10.00	\$11.50	\$21.50	\$0.00	\$0.00	\$21.50	
689	00045841	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
690	00045842	20/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
691	00045843	20/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
692	00045844	20/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
693	00045845	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
694	00045846	20/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
695	00045847	20/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
696	00045848	20/01/2017	\$10.00	\$0.10	\$10.10	\$0.00	\$0.00	\$10.10	
697	00045849	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
698	00045850	20/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
699	00045851	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
700	00045852	20/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
701	00045853	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
702	00045854	20/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
703	00045855	20/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
704	00045856	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
705	00045857	20/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
706	00045858	20/01/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
707	00045859	20/01/2017	\$12.00	\$18.00	\$30.00	\$0.00	\$0.00	\$30.00	
708	00045860	20/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
709	00045861	20/01/2017	\$50.00	\$8.00	\$58.00	\$0.00	\$0.00	\$58.00	
710	00045862	20/01/2017	\$40.00	\$8.00	\$48.00	\$0.00	\$0.00	\$48.00	
711	00045863	20/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
712	00045864	20/01/2017	\$45.00	\$5.00	\$50.00	\$0.00	\$0.00	\$50.00	
713	00045865	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
714	00045866	20/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
715	00045867	20/01/2017	\$11.50	\$2.00	\$13.50	\$0.00	\$0.00	\$13.50	
716	00045868	20/01/2017	\$25.00	\$21.00	\$46.00	\$0.00	\$0.00	\$46.00	
717	00045869	20/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
718	00045870	20/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
719	00045871	20/01/2017	\$10.00	\$9.50	\$19.50	\$0.00	\$0.00	\$19.50	
720	00045872	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
721	00045873	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
722	00045874	20/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
723	00045875	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
724	00045876	20/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
725	00045877	20/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
726	00045878	20/01/2017	\$0.00	\$58.00	\$58.00	\$0.00	\$0.00	\$58.00	
727	00045879	20/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
728	00045880	21/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
729	00045881	21/01/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
730	00045882	21/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
731	00045883	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
732	00045884	21/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
733	00045885	21/01/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
734	00045886	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
735	00045887	21/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
736	00045888	21/01/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
737	00045889	21/01/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
738	00045890	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
739	00045891	21/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
740	00045892	21/01/2017	\$12.50	\$11.00	\$23.50	\$0.00	\$0.00	\$23.50	
741	00045893	21/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
742	00045894	21/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
743	00045895	21/01/2017	\$10.00	\$9.10	\$19.10	\$0.00	\$0.00	\$19.10	
744	00045896	21/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
745	00045897	21/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
746	00045898	21/01/2017	\$10.00	\$10.50	\$20.50	\$0.00	\$0.00	\$20.50	
747	00045899	21/01/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
748	00045900	21/01/2017	\$10.00	\$20.70	\$30.70	\$0.00	\$0.00	\$30.70	
749	00045901	21/01/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
750	00045902	21/01/2017	\$11.50	\$3.00	\$14.50	\$0.00	\$0.00	\$14.50	
751	00045903	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
752	00045904	21/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
753	00045905	21/01/2017	\$15.00	\$16.50	\$31.50	\$0.00	\$0.00	\$31.50	
754	00045906	21/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
755	00045907	21/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
756	00045908	21/01/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
757	00045909	21/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
758	00045910	21/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
759	00045911	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
760	00045912	21/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
761	00045913	21/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
762	00045914	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
763	00045915	21/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
764	00045916	21/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
765	00045917	21/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
766	00045918	21/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
767	00045919	21/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
768	00045920	21/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
769	00045921	21/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
770	00045922	21/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
771	00045923	21/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
772	00045924	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
773	00045925	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
774	00045926	21/01/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	
775	00045927	21/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
776	00045928	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
777	00045929	21/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
778	00045930	21/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
779	00045931	21/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
780	00045932	21/01/2017	\$15.00	\$10.00	\$25.00	\$0.00	\$0.00	\$25.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
781	00045933	21/01/2017	\$60.00	\$6.00	\$66.00	\$0.00	\$0.00	\$66.00	
782	00045934	21/01/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
783	00045935	21/01/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
784	00045936	21/01/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
785	00045937	21/01/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
786	00045938	21/01/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
787	00045939	21/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
788	00045940	21/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
789	00045941	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
790	00045942	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
791	00045943	21/01/2017	\$15.00	\$21.00	\$36.00	\$0.00	\$0.00	\$36.00	
792	00045944	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
793	00045945	21/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
794	00045946	21/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
795	00045947	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
796	00045948	21/01/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
797	00045949	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
798	00045950	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
799	00045951	21/01/2017	\$0.00	\$1.00	\$1.00	\$0.00	\$0.00	\$1.00	
800	00045952	21/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
801	00045953	21/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
802	00045954	21/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
803	00045955	21/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
804	00045956	21/01/2017	\$0.00	\$188.00	\$188.00	\$0.00	\$0.00	\$188.00	
805	00045957	21/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
806	00045958	21/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
807	00045959	22/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
808	00045960	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
809	00045961	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
810	00045962	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
811	00045963	22/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
812	00045964	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
813	00045965	22/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
814	00045966	22/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
815	00045967	22/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
816	00045968	22/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
817	00045969	22/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
818	00045970	22/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
819	00045971	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
820	00045972	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
821	00045973	22/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
822	00045974	22/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
823	00045975	22/01/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
824	00045976	22/01/2017	\$0.00	\$5.50	\$5.50	\$0.00	\$0.00	\$5.50	
825	00045977	22/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
826	00045978	22/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
827	00045979	22/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
828	00045980	22/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
829	00045981	22/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
830	00045982	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
831	00045983	22/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
832	00045984	22/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
833	00045985	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
834	00045986	22/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
835	00045987	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
836	00045988	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
837	00045989	22/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
838	00045990	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
839	00045991	22/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
840	00045992	22/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
841	00045993	22/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
842	00045994	22/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
843	00045995	22/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
844	00045996	22/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
845	00045997	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
846	00045998	22/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
847	00045999	22/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
848	00046000	22/01/2017	\$35.00	\$8.50	\$43.50	\$0.00	\$0.00	\$43.50	
849	00046001	22/01/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
850	00046002	22/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
851	00046003	22/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
852	00046004	22/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
853	00046005	22/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
854	00046006	22/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
855	00046007	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
856	00046008	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
857	00046009	23/01/2017	\$15.00	\$10.00	\$25.00	\$0.00	\$0.00	\$25.00	
858	00046010	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
859	00046011	23/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
860	00046012	23/01/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
861	00046013	23/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
862	00046014	23/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
863	00046015	23/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
864	00046016	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
865	00046017	23/01/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
866	00046018	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
867	00046019	23/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
868	00046020	23/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
869	00046021	23/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
870	00046022	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
871	00046023	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
872	00046024	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
873	00046025	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
874	00046026	23/01/2017	\$20.00	\$7.00	\$27.00	\$0.00	\$0.00	\$27.00	
875	00046027	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
876	00046028	23/01/2017	\$110.00	\$8.00	\$118.00	\$0.00	\$0.00	\$118.00	
877	00046029	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
878	00046030	23/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
879	00046031	23/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
880	00046032	23/01/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
881	00046033	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
882	00046034	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
883	00046035	23/01/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
884	00046036	23/01/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
885	00046037	23/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
886	00046038	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
887	00046039	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
888	00046040	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
889	00046041	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
890	00046042	23/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
891	00046043	23/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
892	00046044	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
893	00046045	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
894	00046046	23/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
895	00046047	23/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
896	00046048	23/01/2017	\$10.00	\$31.00	\$41.00	\$0.00	\$0.00	\$41.00	
897	00046049	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
898	00046050	23/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
899	00046051	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
900	00046052	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
901	00046053	23/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
902	00046054	23/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
903	00046055	23/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
904	00046056	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
905	00046057	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
906	00046058	23/01/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
907	00046059	23/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
908	00046060	23/01/2017	\$15.00	\$4.00	\$19.00	\$0.00	\$0.00	\$19.00	
909	00046061	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
910	00046062	23/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
911	00046063	23/01/2017	\$15.00	\$4.00	\$19.00	\$0.00	\$0.00	\$19.00	
912	00046064	23/01/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
913	00046065	23/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
914	00046066	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
915	00046067	23/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
916	00046068	23/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
917	00046069	23/01/2017	\$35.00	\$13.00	\$48.00	\$0.00	\$0.00	\$48.00	
918	00046070	23/01/2017	\$10.00	\$90.00	\$100.00	\$0.00	\$0.00	\$100.00	
919	00046071	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
920	00046072	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
921	00046073	23/01/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
922	00046074	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
923	00046075	23/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
924	00046076	23/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
925	00046077	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
926	00046078	23/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
927	00046079	23/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
928	00046080	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
929	00046081	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
930	00046082	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
931	00046083	23/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
932	00046084	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
933	00046085	23/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
934	00046086	23/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
935	00046087	23/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
936	00046088	23/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
937	00046089	23/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
938	00046090	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
939	00046091	23/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
940	00046092	23/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
941	00046093	23/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
942	00046094	23/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
943	00046095	23/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
944	00046096	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
945	00046097	23/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
946	00046098	23/01/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
947	00046099	23/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
948	00046100	23/01/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
949	00046101	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
950	00046102	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
951	00046103	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
952	00046104	23/01/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
953	00046105	23/01/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
954	00046106	23/01/2017	\$12.50	\$11.00	\$23.50	\$0.00	\$0.00	\$23.50	
955	00046107	23/01/2017	\$10.00	\$37.00	\$47.00	\$0.00	\$0.00	\$47.00	
956	00046108	23/01/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
957	00046109	23/01/2017	\$25.00	\$21.00	\$46.00	\$0.00	\$0.00	\$46.00	
958	00046110	23/01/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
959	00046111	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
960	00046112	23/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
961	00046113	23/01/2017	\$0.00	\$180.00	\$180.00	\$0.00	\$0.00	\$180.00	
962	00046114	23/01/2017	\$17.50	\$3.00	\$20.50	\$0.00	\$0.00	\$20.50	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
963	00046115	24/01/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
964	00046116	24/01/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
965	00046117	24/01/2017	\$1.50	\$5.00	\$6.50	\$0.00	\$0.00	\$6.50	
966	00046118	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
967	00046119	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
968	00046120	24/01/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
969	00046121	24/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
970	00046122	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
971	00046123	24/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
972	00046124	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
973	00046125	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
974	00046126	24/01/2017	\$0.00	\$21.00	\$21.00	\$0.00	\$0.00	\$21.00	
975	00046127	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
976	00046128	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
977	00046129	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
978	00046130	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
979	00046131	24/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
980	00046132	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
981	00046133	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
982	00046134	24/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
983	00046135	24/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
984	00046136	24/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
985	00046137	24/01/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
986	00046138	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
987	00046139	24/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
988	00046140	24/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
989	00046141	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
990	00046142	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
991	00046143	24/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
992	00046144	24/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
993	00046145	24/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
994	00046146	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
995	00046147	24/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
996	00046148	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
997	00046149	24/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
998	00046150	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
999	00046151	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1000	00046152	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1001	00046153	24/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1002	00046154	24/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1003	00046155	24/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1004	00046156	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1005	00046157	24/01/2017	\$0.00	\$1.50	\$1.50	\$0.00	\$0.00	\$1.50	
1006	00046158	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1007	00046159	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1008	00046160	24/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1009	00046161	24/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1010	00046162	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1011	00046163	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1012	00046164	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1013	00046165	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1014	00046166	24/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1015	00046167	24/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
1016	00046168	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1017	00046169	24/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1018	00046170	24/01/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
1019	00046171	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1020	00046172	24/01/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
1021	00046173	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1022	00046174	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1023	00046175	24/01/2017	\$30.00	\$11.00	\$41.00	\$0.00	\$0.00	\$41.00	
1024	00046176	24/01/2017	\$11.50	\$3.00	\$14.50	\$0.00	\$0.00	\$14.50	
1025	00046177	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1026	00046178	24/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1027	00046179	24/01/2017	\$30.00	\$25.00	\$55.00	\$0.00	\$0.00	\$55.00	
1028	00046180	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1029	00046181	24/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1030	00046182	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1031	00046183	24/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1032	00046184	24/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1033	00046185	24/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1034	00046186	24/01/2017	\$34.00	\$5.00	\$39.00	\$0.00	\$0.00	\$39.00	
1035	00046187	24/01/2017	\$25.00	\$21.00	\$46.00	\$0.00	\$0.00	\$46.00	
1036	00046188	24/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1037	00046189	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1038	00046190	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1039	00046191	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1040	00046192	24/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1041	00046193	24/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1042	00046194	24/01/2017	\$35.00	\$5.50	\$40.50	\$0.00	\$0.00	\$40.50	
1043	00046195	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1044	00046196	24/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1045	00046197	24/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1046	00046198	24/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
1047	00046199	24/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1048	00046200	24/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1049	00046201	24/01/2017	\$0.00	\$199.00	\$199.00	\$0.00	\$0.00	\$199.00	
1050	00046202	24/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1051	00046203	24/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1052	00046204	24/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1053	00046205	25/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1054	00046206	25/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1055	00046207	25/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1056	00046208	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1057	00046209	25/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
1058	00046210	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1059	00046211	25/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1060	00046212	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1061	00046213	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1062	00046214	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1063	00046215	25/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1064	00046216	25/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
1065	00046217	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1066	00046218	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1067	00046219	25/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1068	00046220	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1069	00046221	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1070	00046222	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1071	00046223	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1072	00046224	25/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1073	00046225	25/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1074	00046226	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1075	00046227	25/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1076	00046228	25/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1077	00046229	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1078	00046230	25/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
1079	00046231	25/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1080	00046232	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1081	00046233	25/01/2017	\$60.00	\$7.00	\$67.00	\$0.00	\$0.00	\$67.00	
1082	00046234	25/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1083	00046235	25/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1084	00046236	25/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1085	00046237	25/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1086	00046238	25/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1087	00046239	25/01/2017	\$10.00	\$23.00	\$33.00	\$0.00	\$0.00	\$33.00	
1088	00046240	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1089	00046241	25/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1090	00046242	25/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1091	00046243	25/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1092	00046244	25/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1093	00046245	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1094	00046246	25/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1095	00046247	25/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1096	00046248	25/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1097	00046249	25/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1098	00046250	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1099	00046251	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1100	00046252	25/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1101	00046253	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1102	00046254	25/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1103	00046255	25/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1104	00046256	25/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1105	00046257	25/01/2017	\$35.00	\$6.00	\$41.00	\$0.00	\$0.00	\$41.00	
1106	00046258	25/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1107	00046259	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1108	00046260	25/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1109	00046261	25/01/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
1110	00046262	25/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1111	00046263	25/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1112	00046264	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1113	00046265	25/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1114	00046266	25/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1115	00046267	25/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1116	00046268	25/01/2017	\$0.00	\$141.00	\$141.00	\$0.00	\$0.00	\$141.00	
1117	00046269	25/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1118	00046270	26/01/2017	\$10.00	\$65.00	\$75.00	\$0.00	\$0.00	\$75.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1119	00046271	26/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1120	00046272	26/01/2017	\$40.00	\$7.00	\$47.00	\$0.00	\$0.00	\$47.00	
1121	00046273	26/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1122	00046274	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1123	00046275	26/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
1124	00046276	26/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1125	00046277	26/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1126	00046278	26/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1127	00046279	26/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1128	00046280	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1129	00046281	26/01/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
1130	00046282	26/01/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
1131	00046283	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1132	00046284	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1133	00046285	26/01/2017	\$40.00	\$6.00	\$46.00	\$0.00	\$0.00	\$46.00	
1134	00046286	26/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1135	00046287	26/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1136	00046288	26/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
1137	00046289	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1138	00046290	26/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1139	00046291	26/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1140	00046292	26/01/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
1141	00046293	26/01/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1142	00046294	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1143	00046295	26/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1144	00046296	26/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1145	00046297	26/01/2017	\$10.00	\$1.50	\$11.50	\$0.00	\$0.00	\$11.50	
1146	00046298	26/01/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
1147	00046299	26/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1148	00046300	26/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1149	00046301	26/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1150	00046302	26/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1151	00046303	26/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1152	00046304	26/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1153	00046305	26/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
1154	00046306	26/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1155	00046307	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1156	00046308	26/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1157	00046309	26/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1158	00046310	26/01/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
1159	00046311	26/01/2017	\$12.50	\$5.00	\$17.50	\$0.00	\$0.00	\$17.50	
1160	00046312	26/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1161	00046313	26/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1162	00046314	26/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1163	00046315	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1164	00046316	26/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1165	00046317	26/01/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
1166	00046318	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1167	00046319	26/01/2017	\$32.00	\$10.00	\$42.00	\$0.00	\$0.00	\$42.00	
1168	00046320	26/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1169	00046321	26/01/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
1170	00046322	26/01/2017	\$30.00	\$11.00	\$41.00	\$0.00	\$0.00	\$41.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1171	00046323	26/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1172	00046324	26/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1173	00046325	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1174	00046326	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1175	00046327	26/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1176	00046328	26/01/2017	\$0.00	\$263.00	\$263.00	\$0.00	\$0.00	\$263.00	
1177	00046329	26/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1178	00046330	27/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1179	00046331	30/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1180	00046332	30/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1181	00046333	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1182	00046334	30/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1183	00046335	30/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1184	00046336	30/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1185	00046337	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1186	00046338	30/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1187	00046339	30/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1188	00046340	30/01/2017	\$0.00	\$12.00	\$12.00	\$0.00	\$0.00	\$12.00	
1189	00046341	30/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1190	00046342	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1191	00046343	30/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1192	00046344	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1193	00046345	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1194	00046346	30/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1195	00046347	30/01/2017	\$10.00	\$14.00	\$24.00	\$24.00	\$0.00	\$0.00	
1196	00046348	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1197	00046349	30/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1198	00046350	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1199	00046351	30/01/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
1200	00046352	30/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1201	00046353	30/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1202	00046354	30/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1203	00046355	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1204	00046356	30/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1205	00046357	30/01/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
1206	00046358	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1207	00046359	30/01/2017	\$40.00	\$6.00	\$46.00	\$0.00	\$0.00	\$46.00	
1208	00046360	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1209	00046361	30/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1210	00046362	30/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1211	00046363	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1212	00046364	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1213	00046365	30/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1214	00046366	30/01/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1215	00046367	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1216	00046368	30/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1217	00046369	30/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1218	00046370	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1219	00046371	30/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1220	00046372	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1221	00046373	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1222	00046374	30/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1223	00046375	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1224	00046376	30/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1225	00046377	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1226	00046378	30/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1227	00046379	30/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1228	00046380	30/01/2017	\$11.50	\$7.00	\$18.50	\$0.00	\$0.00	\$18.50	
1229	00046381	30/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1230	00046382	30/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1231	00046383	30/01/2017	\$32.00	\$11.00	\$43.00	\$0.00	\$0.00	\$43.00	
1232	00046384	30/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1233	00046385	30/01/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1234	00046386	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1235	00046387	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1236	00046388	30/01/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
1237	00046389	30/01/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
1238	00046390	30/01/2017	\$10.00	\$17.00	\$27.00	\$2.00	\$0.00	\$25.00	
1239	00046391	30/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1240	00046392	30/01/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
1241	00046393	30/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1242	00046394	30/01/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1243	00046395	30/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1244	00046396	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1245	00046397	30/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1246	00046398	30/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1247	00046399	30/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1248	00046400	30/01/2017	\$35.00	\$7.00	\$42.00	\$0.00	\$0.00	\$42.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1249	00046401	30/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1250	00046402	30/01/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
1251	00046403	30/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1252	00046404	30/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1253	00046405	30/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1254	00046406	30/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1255	00046407	30/01/2017	\$0.00	\$344.00	\$344.00	\$0.00	\$0.00	\$344.00	
1256	00046408	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1257	00046409	31/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1258	00046410	31/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1259	00046411	31/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1260	00046412	31/01/2017	\$40.00	\$5.00	\$45.00	\$0.00	\$0.00	\$45.00	
1261	00046413	31/01/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
1262	00046414	31/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1263	00046415	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1264	00046416	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1265	00046417	31/01/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
1266	00046418	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1267	00046419	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1268	00046420	31/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1269	00046421	31/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1270	00046422	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1271	00046423	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1272	00046424	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1273	00046425	31/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1274	00046426	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1275	00046427	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1276	00046428	31/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1277	00046429	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1278	00046430	31/01/2017	\$0.00	\$1,464.00	\$1,464.00	\$1,464.00	\$0.00	\$0.00	
1279	00046431	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1280	00046432	31/01/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1281	00046433	31/01/2017	\$30.00	\$3.00	\$33.00	\$0.00	\$0.00	\$33.00	
1282	00046434	31/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1283	00046435	31/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1284	00046436	31/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1285	00046437	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1286	00046438	31/01/2017	\$12.00	\$4.00	\$16.00	\$0.00	\$0.00	\$16.00	
1287	00046439	31/01/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
1288	00046440	31/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1289	00046441	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1290	00046442	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1291	00046443	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1292	00046444	31/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1293	00046445	31/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1294	00046446	31/01/2017	\$35.00	\$5.10	\$40.10	\$0.00	\$0.00	\$40.10	
1295	00046447	31/01/2017	\$10.00	\$10.50	\$20.50	\$0.00	\$0.00	\$20.50	
1296	00046448	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1297	00046449	31/01/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1298	00046450	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1299	00046451	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1300	00046452	31/01/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1301	00046453	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1302	00046454	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1303	00046455	31/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1304	00046456	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1305	00046457	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1306	00046458	31/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1307	00046459	31/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1308	00046460	31/01/2017	\$10.00	\$10.50	\$20.50	\$0.00	\$0.00	\$20.50	
1309	00046461	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1310	00046462	31/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1311	00046463	31/01/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1312	00046464	31/01/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1313	00046465	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1314	00046466	31/01/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
1315	00046467	31/01/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1316	00046468	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1317	00046469	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1318	00046470	31/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1319	00046471	31/01/2017	\$12.00	\$12.00	\$24.00	\$0.00	\$0.00	\$24.00	
1320	00046472	31/01/2017	\$10.00	\$12.60	\$22.60	\$0.10	\$0.00	\$22.50	
1321	00046473	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1322	00046474	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1323	00046475	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1324	00046476	31/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1325	00046477	31/01/2017	\$130.00	\$8.00	\$138.00	\$0.00	\$0.00	\$138.00	
1326	00046478	31/01/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1327	00046479	31/01/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1328	00046480	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1329	00046481	31/01/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1330	00046482	31/01/2017	\$35.00	\$10.50	\$45.50	\$0.00	\$0.00	\$45.50	
1331	00046483	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1332	00046484	31/01/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1333	00046485	31/01/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1334	00046486	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1335	00046487	31/01/2017	\$10.00	\$32.00	\$42.00	\$0.00	\$0.00	\$42.00	
1336	00046488	31/01/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1337	00046489	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1338	00046490	31/01/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1339	00046491	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1340	00046492	31/01/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1341	00046493	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1342	00046494	31/01/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
1343	00046495	31/01/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1344	00046496	31/01/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1345	00046497	31/01/2017	\$0.00	\$106.00	\$106.00	\$0.00	\$0.00	\$106.00	
1346	00046498	31/01/2017	\$12.00	\$14.50	\$26.50	\$0.00	\$0.00	\$26.50	
1347	00046499	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1348	00046500	01/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1349	00046501	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1350	00046502	01/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1351	00046503	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1352	00046504	01/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1353	00046505	01/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1354	00046506	01/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1355	00046507	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1356	00046508	01/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1357	00046509	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1358	00046510	01/02/2017	\$40.00	\$8.00	\$48.00	\$0.00	\$0.00	\$48.00	
1359	00046511	01/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1360	00046512	01/02/2017	\$35.00	\$10.00	\$45.00	\$0.00	\$0.00	\$45.00	
1361	00046513	01/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1362	00046514	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1363	00046515	01/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1364	00046516	01/02/2017	\$20.00	\$7.00	\$27.00	\$0.00	\$0.00	\$27.00	
1365	00046517	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1366	00046518	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1367	00046519	01/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1368	00046520	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1369	00046521	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1370	00046522	01/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1371	00046523	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1372	00046524	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1373	00046525	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1374	00046526	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1375	00046527	01/02/2017	\$110.00	\$3.00	\$113.00	\$0.00	\$0.00	\$113.00	
1376	00046528	01/02/2017	\$11.50	\$10.00	\$21.50	\$0.00	\$0.00	\$21.50	
1377	00046529	01/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1378	00046530	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1379	00046531	01/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1380	00046532	01/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1381	00046533	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1382	00046534	01/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1383	00046535	01/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1384	00046536	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1385	00046537	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1386	00046538	01/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1387	00046539	01/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1388	00046540	01/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1389	00046541	01/02/2017	\$15.00	\$10.00	\$25.00	\$0.00	\$0.00	\$25.00	
1390	00046542	01/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1391	00046543	01/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1392	00046544	01/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
1393	00046545	01/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1394	00046546	01/02/2017	\$12.00	\$8.00	\$20.00	\$0.00	\$0.00	\$20.00	
1395	00046547	01/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1396	00046548	01/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1397	00046549	01/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
1398	00046550	01/02/2017	\$12.00	\$20.00	\$32.00	\$0.00	\$0.00	\$32.00	
1399	00046551	01/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1400	00046552	01/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1401	00046553	01/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
1402	00046554	01/02/2017	\$11.50	\$8.00	\$19.50	\$0.00	\$0.00	\$19.50	
1403	00046555	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1404	00046556	01/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1405	00046557	01/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
1406	00046558	01/02/2017	\$12.50	\$5.00	\$17.50	\$0.00	\$0.00	\$17.50	
1407	00046559	01/02/2017	\$10.00	\$13.10	\$23.10	\$0.00	\$0.00	\$23.10	
1408	00046560	01/02/2017	\$37.00	\$7.00	\$44.00	\$0.00	\$0.00	\$44.00	
1409	00046561	01/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1410	00046562	01/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1411	00046563	01/02/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
1412	00046564	01/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1413	00046565	01/02/2017	\$0.00	\$121.00	\$121.00	\$0.00	\$0.00	\$121.00	
1414	00046566	02/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1415	00046567	02/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1416	00046568	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1417	00046569	02/02/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
1418	00046570	02/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1419	00046571	02/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1420	00046572	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1421	00046573	02/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1422	00046574	02/02/2017	\$10.00	\$33.00	\$43.00	\$0.00	\$0.00	\$43.00	
1423	00046575	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1424	00046576	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1425	00046577	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1426	00046578	02/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1427	00046579	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1428	00046580	02/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1429	00046581	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1430	00046582	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1431	00046583	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1432	00046584	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1433	00046585	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1434	00046586	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1435	00046587	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1436	00046588	02/02/2017	\$40.00	\$8.00	\$48.00	\$0.00	\$0.00	\$48.00	
1437	00046589	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1438	00046590	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1439	00046591	02/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1440	00046592	02/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1441	00046593	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1442	00046594	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1443	00046595	02/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1444	00046596	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1445	00046597	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1446	00046598	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1447	00046599	02/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1448	00046600	02/02/2017	\$10.00	\$5.80	\$15.80	\$0.00	\$0.00	\$15.80	
1449	00046601	02/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1450	00046602	02/02/2017	\$260.00	\$6.00	\$266.00	\$0.00	\$0.00	\$266.00	
1451	00046603	02/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1452	00046604	02/02/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
1453	00046605	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1454	00046606	02/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1455	00046607	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1456	00046608	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1457	00046609	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1458	00046610	02/02/2017	\$40.00	\$11.00	\$51.00	\$0.00	\$0.00	\$51.00	
1459	00046611	02/02/2017	\$260.00	\$6.00	\$266.00	\$0.00	\$0.00	\$266.00	
1460	00046612	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1461	00046613	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1462	00046614	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1463	00046615	02/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1464	00046616	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1465	00046617	02/02/2017	\$25.00	\$11.00	\$36.00	\$0.00	\$0.00	\$36.00	
1466	00046618	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1467	00046619	02/02/2017	\$15.00	\$10.00	\$25.00	\$0.00	\$0.00	\$25.00	
1468	00046620	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1469	00046621	02/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1470	00046622	02/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1471	00046623	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1472	00046624	02/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1473	00046625	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1474	00046626	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1475	00046627	02/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1476	00046628	02/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1477	00046629	02/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1478	00046630	02/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1479	00046631	02/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
1480	00046632	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1481	00046633	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1482	00046634	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1483	00046635	02/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1484	00046636	02/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1485	00046637	02/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1486	00046638	02/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
1487	00046639	02/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1488	00046640	02/02/2017	\$15.00	\$10.00	\$25.00	\$0.00	\$0.00	\$25.00	
1489	00046641	02/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1490	00046642	02/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1491	00046643	02/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1492	00046644	02/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1493	00046645	02/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1494	00046646	02/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1495	00046647	02/02/2017	\$0.00	\$193.00	\$193.00	\$0.00	\$0.00	\$193.00	
1496	00046648	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1497	00046649	03/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1498	00046650	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1499	00046651	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1500	00046652	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1501	00046653	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1502	00046654	03/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1503	00046655	03/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1504	00046656	03/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1505	00046657	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1506	00046658	03/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1507	00046659	03/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1508	00046660	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1509	00046661	03/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1510	00046662	03/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1511	00046663	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1512	00046664	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1513	00046665	03/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1514	00046666	03/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1515	00046667	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1516	00046668	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1517	00046669	03/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1518	00046670	03/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1519	00046671	03/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
1520	00046672	03/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1521	00046673	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1522	00046674	03/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1523	00046675	03/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1524	00046676	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1525	00046677	03/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1526	00046678	03/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1527	00046679	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1528	00046680	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1529	00046681	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1530	00046682	03/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1531	00046683	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1532	00046684	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1533	00046685	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1534	00046686	03/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1535	00046687	03/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1536	00046688	03/02/2017	\$10.00	\$5.80	\$15.80	\$0.30	\$0.00	\$15.50	
1537	00046689	03/02/2017	\$35.00	\$12.00	\$47.00	\$0.00	\$0.00	\$47.00	
1538	00046690	03/02/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
1539	00046691	03/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1540	00046692	03/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1541	00046693	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1542	00046694	03/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1543	00046695	03/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1544	00046696	03/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
1545	00046697	03/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1546	00046698	03/02/2017	\$110.00	\$21.00	\$131.00	\$0.00	\$0.00	\$131.00	
1547	00046699	03/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1548	00046700	03/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1549	00046701	03/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1550	00046702	03/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1551	00046703	03/02/2017	\$0.00	\$228.00	\$228.00	\$0.00	\$0.00	\$228.00	
1552	00046704	04/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1553	00046705	04/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1554	00046706	04/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1555	00046707	04/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1556	00046708	04/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1557	00046709	04/02/2017	\$10.00	\$11.20	\$21.20	\$0.00	\$0.00	\$21.20	
1558	00046710	04/02/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
1559	00046711	04/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
1560	00046712	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1561	00046713	04/02/2017	\$0.00	\$7.00	\$7.00	\$7.00	\$0.00	\$0.00	
1562	00046714	04/02/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	
1563	00046715	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1564	00046716	04/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1565	00046717	04/02/2017	\$10.00	\$31.50	\$41.50	\$0.00	\$0.00	\$41.50	
1566	00046718	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1567	00046719	04/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1568	00046720	04/02/2017	\$162.00	\$6.00	\$168.00	\$0.00	\$0.00	\$168.00	
1569	00046721	04/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1570	00046722	04/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
1571	00046723	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1572	00046724	04/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1573	00046725	04/02/2017	\$10.00	\$19.50	\$29.50	\$0.00	\$0.00	\$29.50	
1574	00046726	04/02/2017	\$15.00	\$9.00	\$24.00	\$0.00	\$0.00	\$24.00	
1575	00046727	04/02/2017	\$37.00	\$5.00	\$42.00	\$0.00	\$0.00	\$42.00	
1576	00046728	04/02/2017	\$37.00	\$15.00	\$52.00	\$0.00	\$0.00	\$52.00	
1577	00046729	04/02/2017	\$160.00	\$6.00	\$166.00	\$0.00	\$0.00	\$166.00	
1578	00046730	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1579	00046731	04/02/2017	\$10.00	\$14.50	\$24.50	\$0.00	\$0.00	\$24.50	
1580	00046732	04/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1581	00046733	04/02/2017	\$30.00	\$1.50	\$31.50	\$0.00	\$0.00	\$31.50	
1582	00046734	04/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
1583	00046735	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1584	00046736	04/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1585	00046737	04/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1586	00046738	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1587	00046739	04/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1588	00046740	04/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1589	00046741	04/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1590	00046742	04/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1591	00046743	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1592	00046744	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1593	00046745	04/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1594	00046746	04/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
1595	00046747	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1596	00046748	04/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1597	00046749	04/02/2017	\$10.00	\$31.00	\$41.00	\$0.00	\$0.00	\$41.00	
1598	00046750	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1599	00046751	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1600	00046752	04/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
1601	00046753	04/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1602	00046754	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1603	00046755	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1604	00046756	04/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1605	00046757	04/02/2017	\$110.00	\$9.00	\$119.00	\$0.00	\$0.00	\$119.00	
1606	00046758	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1607	00046759	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1608	00046760	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1609	00046761	04/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1610	00046762	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1611	00046763	04/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1612	00046764	04/02/2017	\$35.00	\$13.00	\$48.00	\$0.00	\$0.00	\$48.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1613	00046765	04/02/2017	\$10.00	\$108.00	\$118.00	\$0.00	\$0.00	\$118.00	
1614	00046766	04/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1615	00046767	04/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1616	00046768	04/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1617	00046769	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1618	00046770	04/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
1619	00046771	04/02/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
1620	00046772	04/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1621	00046773	04/02/2017	\$10.00	\$13.10	\$23.10	\$0.10	\$0.00	\$23.00	
1622	00046774	04/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1623	00046775	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1624	00046776	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1625	00046777	04/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1626	00046778	04/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1627	00046779	04/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1628	00046780	04/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1629	00046781	04/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1630	00046782	04/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1631	00046783	04/02/2017	\$30.00	\$11.00	\$41.00	\$0.00	\$0.00	\$41.00	
1632	00046784	04/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1633	00046785	04/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1634	00046786	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1635	00046787	04/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1636	00046788	04/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1637	00046789	04/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1638	00046790	04/02/2017	\$0.00	\$306.00	\$306.00	\$0.00	\$0.00	\$306.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1639	00046791	04/02/2017	\$30.00	\$25.00	\$55.00	\$0.00	\$0.00	\$55.00	
1640	00046792	04/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1641	00046793	04/02/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
1642	00046794	05/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1643	00046795	05/02/2017	\$11.50	\$10.00	\$21.50	\$0.00	\$0.00	\$21.50	
1644	00046796	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1645	00046797	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1646	00046798	05/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1647	00046799	05/02/2017	\$160.00	\$5.00	\$165.00	\$0.00	\$0.00	\$165.00	
1648	00046800	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1649	00046801	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1650	00046802	05/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1651	00046803	05/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
1652	00046804	05/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1653	00046805	05/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
1654	00046806	05/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1655	00046807	05/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1656	00046808	05/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1657	00046809	05/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1658	00046810	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1659	00046811	05/02/2017	\$10.00	\$28.50	\$38.50	\$0.00	\$0.00	\$38.50	
1660	00046812	05/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1661	00046813	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1662	00046814	05/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1663	00046815	05/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
1664	00046816	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1665	00046817	05/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1666	00046818	05/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1667	00046819	05/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1668	00046820	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1669	00046821	05/02/2017	\$0.00	\$15.00	\$15.00	\$0.00	\$0.00	\$15.00	
1670	00046822	05/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1671	00046823	05/02/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
1672	00046824	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1673	00046825	05/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1674	00046826	05/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1675	00046827	05/02/2017	\$112.00	\$11.00	\$123.00	\$0.00	\$0.00	\$123.00	
1676	00046828	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1677	00046829	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1678	00046830	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1679	00046831	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1680	00046832	05/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1681	00046833	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1682	00046834	05/02/2017	\$12.00	\$7.00	\$19.00	\$0.00	\$0.00	\$19.00	
1683	00046835	05/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1684	00046836	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1685	00046837	05/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1686	00046838	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1687	00046839	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1688	00046840	05/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1689	00046841	05/02/2017	\$10.00	\$21.50	\$31.50	\$0.00	\$0.00	\$31.50	
1690	00046842	05/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1691	00046843	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1692	00046844	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1693	00046845	05/02/2017	\$0.00	\$21.00	\$21.00	\$0.00	\$0.00	\$21.00	
1694	00046846	05/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1695	00046847	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1696	00046848	05/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1697	00046849	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1698	00046850	05/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1699	00046851	05/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1700	00046852	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1701	00046853	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1702	00046854	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1703	00046855	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1704	00046856	05/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1705	00046857	05/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1706	00046858	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1707	00046859	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1708	00046860	05/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1709	00046861	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1710	00046862	05/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1711	00046863	05/02/2017	\$10.00	\$16.00	\$26.00	\$1.00	\$0.00	\$25.00	
1712	00046864	05/02/2017	\$12.00	\$12.00	\$24.00	\$0.00	\$0.00	\$24.00	
1713	00046865	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1714	00046866	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1715	00046867	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1716	00046868	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1717	00046869	05/02/2017	\$10.00	\$6.50	\$16.50	\$0.00	\$0.00	\$16.50	
1718	00046870	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1719	00046871	05/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1720	00046872	05/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1721	00046873	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1722	00046874	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1723	00046875	05/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1724	00046876	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1725	00046877	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1726	00046878	05/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1727	00046879	05/02/2017	\$12.00	\$11.00	\$23.00	\$0.00	\$0.00	\$23.00	
1728	00046880	05/02/2017	\$0.00	\$107.00	\$107.00	\$0.00	\$0.00	\$107.00	
1729	00046881	05/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1730	00046882	06/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1731	00046883	06/02/2017	\$10.00	\$35.00	\$45.00	\$2.00	\$0.00	\$43.00	
1732	00046884	06/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1733	00046885	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1734	00046886	06/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1735	00046887	06/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1736	00046888	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1737	00046889	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1738	00046890	06/02/2017	\$200.00	\$0.00	\$200.00	\$0.00	\$0.00	\$200.00	
1739	00046891	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1740	00046892	06/02/2017	\$200.00	\$5.00	\$205.00	\$20.00	\$0.00	\$185.00	
1741	00046893	06/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1742	00046894	06/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1743	00046895	06/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1744	00046896	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1745	00046897	06/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1746	00046898	06/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1747	00046899	06/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1748	00046900	06/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1749	00046901	06/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1750	00046902	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1751	00046903	06/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1752	00046904	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1753	00046905	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1754	00046906	06/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1755	00046907	06/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1756	00046908	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1757	00046909	06/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1758	00046910	06/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1759	00046911	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1760	00046912	06/02/2017	\$12.00	\$8.00	\$20.00	\$0.00	\$0.00	\$20.00	
1761	00046913	06/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
1762	00046914	06/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1763	00046915	06/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1764	00046916	06/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1765	00046917	06/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1766	00046918	06/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1767	00046919	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1768	00046920	06/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1769	00046921	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1770	00046922	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1771	00046923	06/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1772	00046924	06/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1773	00046925	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1774	00046926	06/02/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
1775	00046927	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1776	00046928	06/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1777	00046929	06/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
1778	00046930	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1779	00046931	06/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
1780	00046932	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1781	00046933	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1782	00046934	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1783	00046935	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1784	00046936	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1785	00046937	06/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1786	00046938	06/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1787	00046939	06/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1788	00046940	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1789	00046941	06/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1790	00046942	06/02/2017	\$35.00	\$4.50	\$39.50	\$0.00	\$0.00	\$39.50	
1791	00046943	06/02/2017	\$11.50	\$7.00	\$18.50	\$0.00	\$0.00	\$18.50	
1792	00046944	06/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1793	00046945	06/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1794	00046946	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1795	00046947	06/02/2017	\$200.00	\$0.00	\$200.00	\$0.00	\$0.00	\$200.00	
1796	00046948	06/02/2017	\$37.00	\$25.00	\$62.00	\$0.00	\$0.00	\$62.00	
1797	00046949	06/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
1798	00046950	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1799	00046951	06/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1800	00046952	06/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1801	00046953	06/02/2017	\$0.00	\$11.00	\$11.00	\$11.00	\$0.00	\$0.00	
1802	00046954	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1803	00046955	06/02/2017	\$37.00	\$10.00	\$47.00	\$0.00	\$0.00	\$47.00	
1804	00046956	06/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1805	00046957	06/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1806	00046958	06/02/2017	\$32.00	\$18.00	\$50.00	\$0.00	\$0.00	\$50.00	
1807	00046959	06/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1808	00046960	06/02/2017	\$110.00	\$4.00	\$114.00	\$0.00	\$0.00	\$114.00	
1809	00046961	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1810	00046962	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1811	00046963	06/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
1812	00046964	06/02/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
1813	00046965	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1814	00046966	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1815	00046967	06/02/2017	\$0.00	\$4.00	\$4.00	\$4.00	\$0.00	\$0.00	
1816	00046968	06/02/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
1817	00046969	06/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1818	00046970	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1819	00046971	06/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1820	00046972	06/02/2017	\$200.00	\$5.00	\$205.00	\$10.00	\$0.00	\$195.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1821	00046973	06/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1822	00046974	06/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
1823	00046975	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1824	00046976	06/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
1825	00046977	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1826	00046978	06/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1827	00046979	06/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1828	00046980	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1829	00046981	06/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1830	00046982	06/02/2017	\$12.00	\$9.00	\$21.00	\$0.00	\$0.00	\$21.00	
1831	00046983	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1832	00046984	06/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1833	00046985	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1834	00046986	06/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1835	00046987	06/02/2017	\$0.00	\$232.00	\$232.00	\$0.00	\$0.00	\$232.00	
1836	00046988	06/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1837	00046989	06/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1838	00046990	06/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1839	00046991	06/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1840	00046992	07/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1841	00046993	07/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1842	00046994	07/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1843	00046995	07/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1844	00046996	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1845	00046997	07/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1846	00046998	07/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1847	00046999	07/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1848	00047000	07/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1849	00047001	07/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1850	00047002	07/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1851	00047003	07/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1852	00047004	07/02/2017	\$10.00	\$12.00	\$22.00	\$22.00	\$0.00	\$0.00	
1853	00047005	07/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1854	00047006	07/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
1855	00047007	07/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1856	00047008	07/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1857	00047009	07/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
1858	00047010	07/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
1859	00047011	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1860	00047012	07/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1861	00047013	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1862	00047014	07/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1863	00047015	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1864	00047016	07/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1865	00047017	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1866	00047018	07/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1867	00047019	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1868	00047020	07/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1869	00047021	07/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
1870	00047022	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1871	00047023	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1872	00047024	07/02/2017	\$0.00	\$9.00	\$9.00	\$9.00	\$0.00	\$0.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1873	00047025	07/02/2017	\$12.00	\$11.00	\$23.00	\$0.00	\$0.00	\$23.00	
1874	00047026	07/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1875	00047027	07/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1876	00047028	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1877	00047029	07/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1878	00047030	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1879	00047031	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1880	00047032	07/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1881	00047033	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1882	00047034	07/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1883	00047035	07/02/2017	\$12.50	\$5.00	\$17.50	\$0.00	\$0.00	\$17.50	
1884	00047036	07/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1885	00047037	07/02/2017	\$30.00	\$20.00	\$50.00	\$0.00	\$0.00	\$50.00	
1886	00047038	07/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1887	00047039	07/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
1888	00047040	07/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1889	00047041	07/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1890	00047042	07/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1891	00047043	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1892	00047044	07/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
1893	00047045	07/02/2017	\$110.00	\$9.00	\$119.00	\$0.00	\$0.00	\$119.00	
1894	00047046	07/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1895	00047047	07/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1896	00047048	07/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1897	00047049	07/02/2017	\$15.00	\$8.00	\$23.00	\$0.00	\$0.00	\$23.00	
1898	00047050	07/02/2017	\$25.00	\$5.00	\$30.00	\$0.00	\$0.00	\$30.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1899	00047051	07/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1900	00047052	07/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1901	00047053	07/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1902	00047054	07/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1903	00047055	07/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1904	00047056	07/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1905	00047057	07/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
1906	00047058	07/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
1907	00047059	07/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1908	00047060	07/02/2017	\$12.00	\$8.00	\$20.00	\$0.00	\$0.00	\$20.00	
1909	00047061	07/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
1910	00047062	07/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1911	00047063	07/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
1912	00047064	07/02/2017	\$0.00	\$734.00	\$734.00	\$0.00	\$0.00	\$734.00	
1913	00047065	08/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1914	00047066	08/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1915	00047067	08/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1916	00047068	08/02/2017	\$10.00	\$32.00	\$42.00	\$0.00	\$0.00	\$42.00	
1917	00047069	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1918	00047070	08/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1919	00047071	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1920	00047072	08/02/2017	\$40.00	\$4.00	\$44.00	\$0.00	\$0.00	\$44.00	
1921	00047073	08/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1922	00047074	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1923	00047075	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1924	00047076	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1925	00047077	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1926	00047078	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1927	00047079	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1928	00047080	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1929	00047081	08/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1930	00047082	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1931	00047083	08/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1932	00047084	08/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1933	00047085	08/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1934	00047086	08/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1935	00047087	08/02/2017	\$40.00	\$4.00	\$44.00	\$0.00	\$0.00	\$44.00	
1936	00047088	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1937	00047089	08/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
1938	00047090	08/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1939	00047091	08/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
1940	00047092	08/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
1941	00047093	08/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
1942	00047094	08/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
1943	00047095	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1944	00047096	08/02/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
1945	00047097	08/02/2017	\$0.00	\$19.00	\$19.00	\$1.00	\$0.00	\$18.00	
1946	00047098	08/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1947	00047099	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1948	00047100	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1949	00047101	08/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1950	00047102	08/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1951	00047103	08/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1952	00047104	08/02/2017	\$0.00	\$0.60	\$0.60	\$0.00	\$0.00	\$0.60	
1953	00047105	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1954	00047106	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1955	00047107	08/02/2017	\$0.00	\$8.00	\$8.00	\$8.00	\$0.00	\$0.00	
1956	00047108	08/02/2017	\$50.00	\$10.00	\$60.00	\$0.00	\$0.00	\$60.00	
1957	00047109	08/02/2017	\$0.00	\$9.00	\$9.00	\$9.00	\$0.00	\$0.00	
1958	00047110	08/02/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
1959	00047111	08/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
1960	00047112	08/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1961	00047113	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1962	00047114	08/02/2017	\$10.00	\$70.00	\$80.00	\$0.00	\$0.00	\$80.00	
1963	00047115	08/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1964	00047116	08/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
1965	00047117	08/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1966	00047118	08/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1967	00047119	08/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1968	00047120	08/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1969	00047121	08/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1970	00047122	08/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
1971	00047123	08/02/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
1972	00047124	08/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1973	00047125	08/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1974	00047126	08/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1975	00047127	08/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1976	00047128	08/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
1977	00047129	08/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
1978	00047130	08/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
1979	00047131	08/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
1980	00047132	08/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
1981	00047133	08/02/2017	\$11.50	\$26.00	\$37.50	\$0.00	\$0.00	\$37.50	
1982	00047134	08/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
1983	00047135	08/02/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	
1984	00047136	08/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
1985	00047137	08/02/2017	\$0.00	\$235.00	\$235.00	\$0.00	\$0.00	\$235.00	
1986	00047138	08/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1987	00047139	08/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
1988	00047140	09/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
1989	00047141	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1990	00047142	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1991	00047143	09/02/2017	\$10.00	\$16.00	\$26.00	\$1.00	\$0.00	\$25.00	
1992	00047144	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1993	00047145	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1994	00047146	09/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1995	00047147	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
1996	00047148	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
1997	00047149	09/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
1998	00047150	09/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
1999	00047151	09/02/2017	\$10.00	\$39.00	\$49.00	\$0.00	\$0.00	\$49.00	
2000	00047152	09/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2001	00047153	09/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2002	00047154	09/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2003	00047155	09/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
2004	00047156	09/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2005	00047157	09/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
2006	00047158	09/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2007	00047159	09/02/2017	\$12.00	\$9.00	\$21.00	\$0.00	\$0.00	\$21.00	
2008	00047160	09/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2009	00047161	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2010	00047162	09/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2011	00047163	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2012	00047164	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2013	00047165	09/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2014	00047166	09/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2015	00047167	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2016	00047168	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2017	00047169	09/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2018	00047170	09/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2019	00047171	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2020	00047172	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2021	00047173	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2022	00047174	09/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2023	00047175	09/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
2024	00047176	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2025	00047177	09/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2026	00047178	09/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2027	00047179	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2028	00047180	09/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2029	00047181	09/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2030	00047182	09/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2031	00047183	09/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2032	00047184	09/02/2017	\$10.00	\$7.00	\$17.00	\$17.00	\$0.00	\$0.00	
2033	00047185	09/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2034	00047186	09/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2035	00047187	09/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2036	00047188	09/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2037	00047189	09/02/2017	\$13.50	\$6.00	\$19.50	\$0.00	\$0.00	\$19.50	
2038	00047190	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2039	00047191	09/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2040	00047192	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2041	00047193	09/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
2042	00047194	09/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2043	00047195	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2044	00047196	09/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2045	00047197	09/02/2017	\$25.00	\$16.00	\$41.00	\$0.00	\$0.00	\$41.00	
2046	00047198	09/02/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
2047	00047199	09/02/2017	\$110.00	\$5.00	\$115.00	\$0.00	\$0.00	\$115.00	
2048	00047200	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2049	00047201	09/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
2050	00047202	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2051	00047203	09/02/2017	\$45.00	\$12.50	\$57.50	\$0.00	\$0.00	\$57.50	
2052	00047204	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2053	00047205	09/02/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
2054	00047206	09/02/2017	\$310.00	\$6.00	\$316.00	\$0.00	\$0.00	\$316.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2055	00047207	09/02/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
2056	00047208	09/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
2057	00047209	09/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2058	00047210	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2059	00047211	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2060	00047212	09/02/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
2061	00047213	09/02/2017	\$11.50	\$7.00	\$18.50	\$0.00	\$0.00	\$18.50	
2062	00047214	09/02/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
2063	00047215	09/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2064	00047216	09/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2065	00047217	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2066	00047218	09/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2067	00047219	09/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2068	00047220	09/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2069	00047221	09/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2070	00047222	09/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
2071	00047223	09/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2072	00047224	09/02/2017	\$0.00	\$146.00	\$146.00	\$0.00	\$0.00	\$146.00	
2073	00047225	09/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2074	00047226	09/02/2017	\$12.50	\$5.00	\$17.50	\$0.00	\$0.00	\$17.50	
2075	00047227	09/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2076	00047228	10/02/2017	\$10.00	\$47.00	\$57.00	\$0.00	\$0.00	\$57.00	
2077	00047229	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2078	00047230	10/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2079	00047231	10/02/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
2080	00047232	10/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2081	00047233	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2082	00047234	10/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2083	00047235	10/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2084	00047236	10/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
2085	00047237	10/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2086	00047238	10/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2087	00047239	10/02/2017	\$0.00	\$12.00	\$12.00	\$12.00	\$0.00	\$0.00	
2088	00047240	10/02/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
2089	00047241	10/02/2017	\$15.00	\$0.00	\$15.00	\$0.00	\$0.00	\$15.00	
2090	00047242	10/02/2017	\$0.00	\$4.00	\$4.00	\$4.00	\$0.00	\$0.00	
2091	00047243	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2092	00047244	10/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
2093	00047245	10/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2094	00047246	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2095	00047247	10/02/2017	\$12.00	\$0.00	\$12.00	\$0.00	\$0.00	\$12.00	
2096	00047248	10/02/2017	\$12.00	\$8.00	\$20.00	\$0.00	\$0.00	\$20.00	
2097	00047249	10/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2098	00047250	10/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2099	00047251	10/02/2017	\$12.00	\$9.00	\$21.00	\$0.00	\$0.00	\$21.00	
2100	00047252	10/02/2017	\$25.00	\$4.00	\$29.00	\$0.00	\$0.00	\$29.00	
2101	00047253	10/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
2102	00047254	10/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2103	00047255	10/02/2017	\$12.00	\$0.00	\$12.00	\$0.00	\$0.00	\$12.00	
2104	00047256	10/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2105	00047257	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2106	00047258	10/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2107	00047259	10/02/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
2108	00047260	10/02/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
2109	00047261	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2110	00047262	10/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2111	00047263	10/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2112	00047264	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2113	00047265	10/02/2017	\$10.00	\$22.00	\$32.00	\$0.00	\$0.00	\$32.00	
2114	00047266	10/02/2017	\$12.50	\$14.00	\$26.50	\$0.00	\$0.00	\$26.50	
2115	00047267	10/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2116	00047268	10/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2117	00047269	10/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2118	00047270	10/02/2017	\$10.00	\$37.00	\$47.00	\$0.00	\$0.00	\$47.00	
2119	00047271	10/02/2017	\$10.00	\$6.50	\$16.50	\$0.00	\$0.00	\$16.50	
2120	00047272	10/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2121	00047273	10/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2122	00047274	10/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
2123	00047275	10/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2124	00047276	10/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2125	00047277	10/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2126	00047278	10/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2127	00047279	10/02/2017	\$0.00	\$79.00	\$79.00	\$0.00	\$0.00	\$79.00	
2128	00047280	11/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2129	00047281	11/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2130	00047282	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2131	00047283	11/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2132	00047284	11/02/2017	\$27.00	\$20.00	\$47.00	\$0.00	\$0.00	\$47.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2133	00047285	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2134	00047286	11/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2135	00047287	11/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2136	00047288	11/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
2137	00047289	11/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2138	00047290	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2139	00047291	11/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2140	00047292	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2141	00047293	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2142	00047294	11/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2143	00047295	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2144	00047296	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2145	00047297	11/02/2017	\$12.00	\$8.00	\$20.00	\$0.00	\$0.00	\$20.00	
2146	00047298	11/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2147	00047299	11/02/2017	\$30.00	\$3.00	\$33.00	\$0.00	\$0.00	\$33.00	
2148	00047300	11/02/2017	\$185.00	\$5.00	\$190.00	\$0.00	\$0.00	\$190.00	
2149	00047301	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2150	00047302	11/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2151	00047303	11/02/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
2152	00047304	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2153	00047305	11/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2154	00047306	11/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2155	00047307	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2156	00047308	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2157	00047309	11/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
2158	00047310	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2159	00047311	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2160	00047312	11/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2161	00047313	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2162	00047314	11/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
2163	00047315	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2164	00047316	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2165	00047317	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2166	00047318	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2167	00047319	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2168	00047320	11/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2169	00047321	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2170	00047322	11/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
2171	00047323	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2172	00047324	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2173	00047325	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2174	00047326	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2175	00047327	11/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
2176	00047328	11/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2177	00047329	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2178	00047330	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2179	00047331	11/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2180	00047332	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2181	00047333	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2182	00047334	11/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2183	00047335	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2184	00047336	11/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2185	00047337	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2186	00047338	11/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2187	00047339	11/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2188	00047340	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2189	00047341	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2190	00047342	11/02/2017	\$12.00	\$0.00	\$12.00	\$0.00	\$0.00	\$12.00	
2191	00047343	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2192	00047344	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2193	00047345	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2194	00047346	11/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2195	00047347	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2196	00047348	11/02/2017	\$10.00	\$11.20	\$21.20	\$0.00	\$0.00	\$21.20	
2197	00047349	11/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
2198	00047350	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2199	00047351	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2200	00047352	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2201	00047353	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2202	00047354	11/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2203	00047355	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2204	00047356	11/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2205	00047357	11/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2206	00047358	11/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2207	00047359	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2208	00047360	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2209	00047361	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2210	00047362	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2211	00047363	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2212	00047364	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2213	00047365	11/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2214	00047366	11/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2215	00047367	11/02/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
2216	00047368	11/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2217	00047369	11/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2218	00047370	11/02/2017	\$40.00	\$5.00	\$45.00	\$0.00	\$0.00	\$45.00	
2219	00047371	11/02/2017	\$13.50	\$10.00	\$23.50	\$0.00	\$0.00	\$23.50	
2220	00047372	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2221	00047373	11/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2222	00047374	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2223	00047375	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2224	00047376	11/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2225	00047377	11/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2226	00047378	11/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2227	00047379	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2228	00047380	11/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2229	00047381	11/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2230	00047382	11/02/2017	\$0.00	\$28.00	\$28.00	\$0.00	\$0.00	\$28.00	
2231	00047383	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2232	00047384	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2233	00047385	12/02/2017	\$0.00	\$9.00	\$9.00	\$9.00	\$0.00	\$0.00	
2234	00047386	12/02/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
2235	00047387	12/02/2017	\$15.00	\$0.00	\$15.00	\$0.00	\$0.00	\$15.00	
2236	00047388	12/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2237	00047389	12/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2238	00047390	12/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2239	00047391	12/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2240	00047392	12/02/2017	\$40.00	\$5.00	\$45.00	\$0.00	\$0.00	\$45.00	
2241	00047393	12/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
2242	00047394	12/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2243	00047395	12/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2244	00047396	12/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2245	00047397	12/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2246	00047398	12/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2247	00047399	12/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2248	00047400	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2249	00047401	12/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2250	00047402	12/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2251	00047403	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2252	00047404	12/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2253	00047405	12/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2254	00047406	12/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2255	00047407	12/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2256	00047408	12/02/2017	\$35.00	\$7.50	\$42.50	\$0.00	\$0.00	\$42.50	
2257	00047409	12/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2258	00047410	12/02/2017	\$40.00	\$9.00	\$49.00	\$0.00	\$0.00	\$49.00	
2259	00047411	12/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
2260	00047412	12/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2261	00047413	12/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2262	00047414	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2263	00047415	12/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2264	00047416	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2265	00047417	12/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2266	00047418	12/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2267	00047419	12/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2268	00047420	12/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2269	00047421	12/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2270	00047422	12/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
2271	00047423	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2272	00047424	12/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2273	00047425	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2274	00047426	12/02/2017	\$112.00	\$10.00	\$122.00	\$0.00	\$0.00	\$122.00	
2275	00047427	12/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2276	00047428	12/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2277	00047429	12/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2278	00047430	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2279	00047431	12/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2280	00047432	12/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2281	00047433	12/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2282	00047434	12/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
2283	00047435	12/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2284	00047436	12/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2285	00047437	12/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2286	00047438	12/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2287	00047439	12/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2288	00047440	12/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2289	00047441	12/02/2017	\$50.00	\$5.00	\$55.00	\$0.00	\$0.00	\$55.00	
2290	00047442	12/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2291	00047443	12/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2292	00047444	12/02/2017	\$0.00	\$167.00	\$167.00	\$2.00	\$0.00	\$165.00	
2293	00047445	13/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2294	00047446	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2295	00047447	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2296	00047448	13/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2297	00047449	13/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2298	00047450	13/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2299	00047451	13/02/2017	\$0.00	\$12.00	\$12.00	\$0.00	\$0.00	\$12.00	
2300	00047452	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2301	00047453	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2302	00047454	13/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2303	00047455	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2304	00047456	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2305	00047457	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2306	00047458	13/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2307	00047459	13/02/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
2308	00047460	13/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2309	00047461	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2310	00047462	13/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2311	00047463	13/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2312	00047464	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2313	00047465	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2314	00047466	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2315	00047467	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2316	00047468	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2317	00047469	13/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2318	00047470	13/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2319	00047471	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2320	00047472	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2321	00047473	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2322	00047474	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2323	00047475	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2324	00047476	13/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2325	00047477	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2326	00047478	13/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2327	00047479	13/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
2328	00047480	13/02/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
2329	00047481	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2330	00047482	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2331	00047483	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2332	00047484	13/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2333	00047485	13/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2334	00047486	13/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2335	00047487	13/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2336	00047488	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2337	00047489	13/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2338	00047490	13/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2339	00047491	13/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2340	00047492	13/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2341	00047493	13/02/2017	\$10.00	\$9.00	\$19.00	\$19.00	\$0.00	\$0.00	
2342	00047494	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2343	00047495	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2344	00047496	13/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2345	00047497	13/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2346	00047498	13/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2347	00047499	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2348	00047500	13/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2349	00047501	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2350	00047502	13/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2351	00047503	13/02/2017	\$100.00	\$5.00	\$105.00	\$0.00	\$0.00	\$105.00	
2352	00047504	13/02/2017	\$35.00	\$5.60	\$40.60	\$0.10	\$0.00	\$40.50	
2353	00047505	13/02/2017	\$10.00	\$32.00	\$42.00	\$0.00	\$0.00	\$42.00	
2354	00047506	13/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2355	00047507	13/02/2017	\$15.00	\$0.00	\$15.00	\$0.00	\$0.00	\$15.00	
2356	00047508	13/02/2017	\$0.00	\$9.00	\$9.00	\$0.00	\$0.00	\$9.00	
2357	00047509	13/02/2017	\$112.00	\$5.00	\$117.00	\$0.00	\$0.00	\$117.00	
2358	00047510	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2359	00047511	13/02/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
2360	00047512	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2361	00047513	13/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2362	00047514	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2363	00047515	13/02/2017	\$12.00	\$4.00	\$16.00	\$0.00	\$0.00	\$16.00	
2364	00047516	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2365	00047517	13/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2366	00047518	13/02/2017	\$12.00	\$0.00	\$12.00	\$0.00	\$0.00	\$12.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2367	00047519	13/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2368	00047520	13/02/2017	\$132.00	\$7.00	\$139.00	\$0.00	\$0.00	\$139.00	
2369	00047521	13/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
2370	00047522	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2371	00047523	13/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2372	00047524	13/02/2017	\$0.00	\$1.00	\$1.00	\$1.00	\$0.00	\$0.00	
2373	00047525	13/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2374	00047526	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2375	00047527	13/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2376	00047528	13/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2377	00047529	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2378	00047530	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2379	00047531	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2380	00047532	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2381	00047533	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2382	00047534	13/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2383	00047535	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2384	00047536	13/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2385	00047537	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2386	00047538	13/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
2387	00047539	13/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2388	00047540	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2389	00047541	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2390	00047542	13/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2391	00047543	13/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2392	00047544	13/02/2017	\$0.00	\$123.00	\$123.00	\$0.00	\$0.00	\$123.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2393	00047545	13/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2394	00047546	13/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2395	00047547	14/02/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
2396	00047548	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2397	00047549	14/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
2398	00047550	14/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2399	00047551	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2400	00047552	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2401	00047553	14/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2402	00047554	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2403	00047555	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2404	00047556	14/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
2405	00047557	14/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2406	00047558	14/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
2407	00047559	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2408	00047560	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2409	00047561	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2410	00047562	14/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2411	00047563	14/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2412	00047564	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2413	00047565	14/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2414	00047566	14/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2415	00047567	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2416	00047568	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2417	00047569	14/02/2017	\$40.00	\$3.00	\$43.00	\$0.00	\$0.00	\$43.00	
2418	00047570	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2419	00047571	14/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
2420	00047572	14/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
2421	00047573	14/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2422	00047574	14/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2423	00047575	14/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
2424	00047576	14/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2425	00047577	14/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2426	00047578	14/02/2017	\$32.00	\$6.40	\$38.40	\$0.00	\$0.00	\$38.40	
2427	00047579	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2428	00047580	14/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
2429	00047581	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2430	00047582	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2431	00047583	14/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2432	00047584	14/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2433	00047585	14/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2434	00047586	14/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2435	00047587	14/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2436	00047588	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2437	00047589	14/02/2017	\$15.00	\$15.00	\$30.00	\$0.00	\$0.00	\$30.00	
2438	00047590	14/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
2439	00047591	14/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2440	00047592	14/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2441	00047593	14/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2442	00047594	14/02/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
2443	00047595	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2444	00047596	14/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2445	00047597	14/02/2017	\$260.00	\$6.00	\$266.00	\$0.00	\$0.00	\$266.00	
2446	00047598	14/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2447	00047599	14/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2448	00047600	14/02/2017	\$0.00	\$4.00	\$4.00	\$4.00	\$0.00	\$0.00	
2449	00047601	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2450	00047602	14/02/2017	\$32.00	\$3.00	\$35.00	\$0.00	\$0.00	\$35.00	
2451	00047603	14/02/2017	\$32.00	\$3.00	\$35.00	\$0.00	\$0.00	\$35.00	
2452	00047604	14/02/2017	\$60.00	\$6.00	\$66.00	\$0.00	\$0.00	\$66.00	
2453	00047605	14/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2454	00047606	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2455	00047607	14/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2456	00047608	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2457	00047609	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2458	00047610	14/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2459	00047611	14/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2460	00047612	14/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
2461	00047613	14/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
2462	00047614	14/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2463	00047615	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2464	00047616	14/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2465	00047617	14/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2466	00047618	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2467	00047619	14/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2468	00047620	14/02/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
2469	00047621	14/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2470	00047622	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2471	00047623	14/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
2472	00047624	14/02/2017	\$132.00	\$5.00	\$137.00	\$0.00	\$0.00	\$137.00	
2473	00047625	14/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2474	00047626	14/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2475	00047627	14/02/2017	\$0.00	\$122.00	\$122.00	\$0.00	\$0.00	\$122.00	
2476	00047628	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2477	00047629	14/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2478	00047630	14/02/2017	\$25.00	\$15.00	\$40.00	\$0.00	\$0.00	\$40.00	
2479	00047631	14/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2480	00047632	14/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2481	00047633	15/02/2017	\$132.00	\$5.00	\$137.00	\$0.00	\$0.00	\$137.00	
2482	00047634	15/02/2017	\$35.00	\$11.00	\$46.00	\$0.00	\$0.00	\$46.00	
2483	00047635	15/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2484	00047636	15/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2485	00047637	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2486	00047638	15/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2487	00047639	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2488	00047640	15/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2489	00047641	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2490	00047642	15/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2491	00047643	15/02/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
2492	00047644	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2493	00047645	15/02/2017	\$30.00	\$6.00	\$36.00	\$0.00	\$0.00	\$36.00	
2494	00047646	15/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2495	00047647	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2496	00047648	15/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2497	00047649	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2498	00047650	15/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2499	00047651	15/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2500	00047652	15/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2501	00047653	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2502	00047654	15/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2503	00047655	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2504	00047656	15/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2505	00047657	15/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
2506	00047658	15/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
2507	00047659	15/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2508	00047660	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2509	00047661	15/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2510	00047662	15/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2511	00047663	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2512	00047664	15/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
2513	00047665	15/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2514	00047666	15/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2515	00047667	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2516	00047668	15/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
2517	00047669	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2518	00047670	15/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2519	00047671	15/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2520	00047672	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2521	00047673	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2522	00047674	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2523	00047675	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2524	00047676	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2525	00047677	15/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
2526	00047678	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2527	00047679	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2528	00047680	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2529	00047681	15/02/2017	\$10.00	\$38.00	\$48.00	\$0.00	\$0.00	\$48.00	
2530	00047682	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2531	00047683	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2532	00047684	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2533	00047685	15/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2534	00047686	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2535	00047687	15/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2536	00047688	15/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2537	00047689	15/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2538	00047690	15/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2539	00047691	15/02/2017	\$110.00	\$5.00	\$115.00	\$0.00	\$0.00	\$115.00	
2540	00047692	15/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2541	00047693	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2542	00047694	15/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2543	00047695	15/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2544	00047696	15/02/2017	\$60.00	\$6.00	\$66.00	\$0.00	\$0.00	\$66.00	
2545	00047697	15/02/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
2546	00047698	15/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2547	00047699	15/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2548	00047700	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2549	00047701	15/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2550	00047702	15/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2551	00047703	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2552	00047704	15/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2553	00047705	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2554	00047706	15/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2555	00047707	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2556	00047708	15/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2557	00047709	15/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2558	00047710	15/02/2017	\$40.00	\$26.00	\$66.00	\$0.00	\$0.00	\$66.00	
2559	00047711	15/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
2560	00047712	15/02/2017	\$0.00	\$64.00	\$64.00	\$0.00	\$0.00	\$64.00	
2561	00047713	16/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2562	00047714	16/02/2017	\$0.00	\$35.00	\$35.00	\$0.00	\$0.00	\$35.00	
2563	00047715	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2564	00047716	16/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2565	00047717	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2566	00047718	16/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2567	00047719	16/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2568	00047720	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2569	00047721	16/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2570	00047722	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2571	00047723	16/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2572	00047724	16/02/2017	\$10.00	\$6.50	\$16.50	\$0.00	\$0.00	\$16.50	
2573	00047725	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2574	00047726	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2575	00047727	16/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2576	00047728	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2577	00047729	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2578	00047730	16/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2579	00047731	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2580	00047732	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2581	00047733	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2582	00047734	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2583	00047735	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2584	00047736	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2585	00047737	16/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2586	00047738	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2587	00047739	16/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
2588	00047740	16/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
2589	00047741	16/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2590	00047742	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2591	00047743	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2592	00047744	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2593	00047745	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2594	00047746	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2595	00047747	16/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
2596	00047748	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2597	00047749	16/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
2598	00047750	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2599	00047751	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2600	00047752	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2601	00047753	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2602	00047754	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2603	00047755	16/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
2604	00047756	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2605	00047757	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2606	00047758	16/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2607	00047759	16/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2608	00047760	16/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2609	00047761	16/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2610	00047762	16/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2611	00047763	16/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2612	00047764	16/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2613	00047765	16/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2614	00047766	16/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2615	00047767	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2616	00047768	16/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
2617	00047769	16/02/2017	\$25.00	\$10.00	\$35.00	\$0.00	\$0.00	\$35.00	
2618	00047770	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2619	00047771	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2620	00047772	16/02/2017	\$0.00	\$11.00	\$11.00	\$11.00	\$0.00	\$0.00	
2621	00047773	16/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2622	00047774	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2623	00047775	16/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2624	00047776	16/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2625	00047777	16/02/2017	\$25.00	\$26.00	\$51.00	\$0.00	\$0.00	\$51.00	
2626	00047778	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2627	00047779	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2628	00047780	16/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2629	00047781	16/02/2017	\$11.50	\$10.00	\$21.50	\$0.00	\$0.00	\$21.50	
2630	00047782	16/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
2631	00047783	16/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2632	00047784	16/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2633	00047785	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2634	00047786	16/02/2017	\$12.00	\$8.00	\$20.00	\$0.00	\$0.00	\$20.00	
2635	00047787	16/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2636	00047788	16/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2637	00047789	16/02/2017	\$35.00	\$9.00	\$44.00	\$0.00	\$0.00	\$44.00	
2638	00047790	16/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2639	00047791	16/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2640	00047792	16/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2641	00047793	16/02/2017	\$100.00	\$5.00	\$105.00	\$0.00	\$0.00	\$105.00	
2642	00047794	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2643	00047795	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2644	00047796	16/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2645	00047797	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2646	00047798	16/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2647	00047799	16/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
2648	00047800	16/02/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
2649	00047801	16/02/2017	\$0.00	\$76.00	\$76.00	\$0.00	\$0.00	\$76.00	
2650	00047802	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2651	00047803	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2652	00047804	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2653	00047805	17/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2654	00047806	17/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2655	00047807	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2656	00047808	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2657	00047809	17/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2658	00047810	17/02/2017	\$32.00	\$10.00	\$42.00	\$0.00	\$0.00	\$42.00	
2659	00047811	17/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2660	00047812	17/02/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
2661	00047813	17/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2662	00047814	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2663	00047815	17/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2664	00047816	17/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2665	00047817	17/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
2666	00047818	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2667	00047819	17/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
2668	00047820	17/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2669	00047821	17/02/2017	\$10.00	\$113.00	\$123.00	\$0.00	\$0.00	\$123.00	
2670	00047822	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2671	00047823	17/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2672	00047824	17/02/2017	\$40.00	\$13.00	\$53.00	\$0.00	\$0.00	\$53.00	
2673	00047825	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2674	00047826	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2675	00047827	17/02/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
2676	00047828	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2677	00047829	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2678	00047830	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2679	00047831	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2680	00047832	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2681	00047833	17/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
2682	00047834	17/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2683	00047835	17/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
2684	00047836	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2685	00047837	17/02/2017	\$10.00	\$4.50	\$14.50	\$0.50	\$0.00	\$14.00	
2686	00047838	17/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2687	00047839	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2688	00047840	17/02/2017	\$47.00	\$0.00	\$47.00	\$0.00	\$0.00	\$47.00	
2689	00047841	17/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
2690	00047842	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2691	00047843	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2692	00047844	17/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2693	00047845	17/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2694	00047846	17/02/2017	\$10.00	\$10.50	\$20.50	\$0.00	\$0.00	\$20.50	
2695	00047847	17/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2696	00047848	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2697	00047849	17/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2698	00047850	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2699	00047851	17/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2700	00047852	17/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2701	00047853	17/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2702	00047854	17/02/2017	\$57.00	\$5.75	\$62.75	\$0.00	\$0.00	\$62.75	
2703	00047855	17/02/2017	\$57.00	\$5.00	\$62.00	\$0.00	\$0.00	\$62.00	
2704	00047856	17/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2705	00047857	17/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2706	00047858	17/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2707	00047859	17/02/2017	\$410.00	\$6.00	\$416.00	\$0.00	\$0.00	\$416.00	
2708	00047860	17/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2709	00047861	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2710	00047862	17/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2711	00047863	17/02/2017	\$32.00	\$5.00	\$37.00	\$0.00	\$0.00	\$37.00	
2712	00047864	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2713	00047865	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2714	00047866	17/02/2017	\$10.00	\$15.00	\$25.00	\$2.00	\$0.00	\$23.00	
2715	00047867	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2716	00047868	17/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2717	00047869	17/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2718	00047870	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2719	00047871	17/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2720	00047872	17/02/2017	\$10.00	\$6.40	\$16.40	\$0.00	\$0.00	\$16.40	
2721	00047873	17/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2722	00047874	17/02/2017	\$35.00	\$0.00	\$35.00	\$0.00	\$0.00	\$35.00	
2723	00047875	17/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2724	00047876	17/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2725	00047877	17/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2726	00047878	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2727	00047879	17/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2728	00047880	17/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2729	00047881	17/02/2017	\$10.00	\$33.00	\$43.00	\$0.00	\$0.00	\$43.00	
2730	00047882	17/02/2017	\$15.00	\$14.50	\$29.50	\$0.00	\$0.00	\$29.50	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2731	00047883	17/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2732	00047884	17/02/2017	\$0.00	\$183.00	\$183.00	\$0.00	\$0.00	\$183.00	
2733	00047885	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2734	00047886	18/02/2017	\$0.00	\$6.00	\$6.00	\$6.00	\$0.00	\$0.00	
2735	00047887	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2736	00047888	18/02/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
2737	00047889	18/02/2017	\$11.50	\$11.00	\$22.50	\$0.00	\$0.00	\$22.50	
2738	00047890	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2739	00047891	18/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2740	00047892	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2741	00047893	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2742	00047894	18/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2743	00047895	18/02/2017	\$35.00	\$17.00	\$52.00	\$0.00	\$0.00	\$52.00	
2744	00047896	18/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2745	00047897	18/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2746	00047898	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2747	00047899	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2748	00047900	18/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2749	00047901	18/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
2750	00047902	18/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
2751	00047903	18/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
2752	00047904	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2753	00047905	18/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2754	00047906	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2755	00047907	18/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2756	00047908	18/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2757	00047909	18/02/2017	\$35.00	\$21.50	\$56.50	\$0.00	\$0.00	\$56.50	
2758	00047910	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2759	00047911	18/02/2017	\$15.00	\$8.00	\$23.00	\$0.00	\$0.00	\$23.00	
2760	00047912	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2761	00047913	18/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
2762	00047914	18/02/2017	\$60.00	\$3.00	\$63.00	\$0.00	\$0.00	\$63.00	
2763	00047915	18/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
2764	00047916	18/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2765	00047917	18/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2766	00047918	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2767	00047919	18/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2768	00047920	18/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2769	00047921	18/02/2017	\$110.00	\$3.00	\$113.00	\$0.00	\$0.00	\$113.00	
2770	00047922	18/02/2017	\$162.00	\$6.00	\$168.00	\$0.00	\$0.00	\$168.00	
2771	00047923	18/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2772	00047924	18/02/2017	\$35.00	\$7.00	\$42.00	\$0.00	\$0.00	\$42.00	
2773	00047925	18/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2774	00047926	18/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2775	00047927	18/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2776	00047928	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2777	00047929	18/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2778	00047930	18/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2779	00047931	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2780	00047932	18/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2781	00047933	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2782	00047934	18/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2783	00047935	18/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2784	00047936	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2785	00047937	18/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2786	00047938	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2787	00047939	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2788	00047940	18/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2789	00047941	18/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2790	00047942	18/02/2017	\$60.00	\$3.00	\$63.00	\$0.00	\$0.00	\$63.00	
2791	00047943	18/02/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
2792	00047944	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2793	00047945	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2794	00047946	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2795	00047947	18/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2796	00047948	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2797	00047949	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2798	00047950	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2799	00047951	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2800	00047952	18/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2801	00047953	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2802	00047954	18/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2803	00047955	18/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
2804	00047956	18/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2805	00047957	18/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2806	00047958	18/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2807	00047959	18/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2808	00047960	18/02/2017	\$35.00	\$11.00	\$46.00	\$0.00	\$0.00	\$46.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2809	00047961	18/02/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
2810	00047962	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2811	00047963	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2812	00047964	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2813	00047965	19/02/2017	\$15.00	\$6.00	\$21.00	\$0.00	\$0.00	\$21.00	
2814	00047966	19/02/2017	\$0.00	\$9.00	\$9.00	\$9.00	\$0.00	\$0.00	
2815	00047967	19/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2816	00047968	19/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2817	00047969	19/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2818	00047970	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2819	00047971	19/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2820	00047972	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2821	00047973	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2822	00047974	19/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2823	00047975	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2824	00047976	19/02/2017	\$40.00	\$7.00	\$47.00	\$0.00	\$0.00	\$47.00	
2825	00047977	19/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2826	00047978	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2827	00047979	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2828	00047980	19/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2829	00047981	19/02/2017	\$15.00	\$16.50	\$31.50	\$0.00	\$0.00	\$31.50	
2830	00047982	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2831	00047983	19/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
2832	00047984	19/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2833	00047985	19/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2834	00047986	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2835	00047987	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2836	00047988	19/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2837	00047989	19/02/2017	\$10.00	\$41.00	\$51.00	\$0.00	\$0.00	\$51.00	
2838	00047990	19/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2839	00047991	19/02/2017	\$0.00	\$24.00	\$24.00	\$0.00	\$0.00	\$24.00	
2840	00047992	19/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2841	00047993	19/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2842	00047994	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2843	00047995	19/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2844	00047996	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2845	00047997	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2846	00047998	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2847	00047999	19/02/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
2848	00048000	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2849	00048001	19/02/2017	\$60.00	\$9.00	\$69.00	\$0.00	\$0.00	\$69.00	
2850	00048002	19/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2851	00048003	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2852	00048004	19/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2853	00048005	19/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2854	00048006	19/02/2017	\$15.00	\$9.00	\$24.00	\$0.00	\$0.00	\$24.00	
2855	00048007	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2856	00048008	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2857	00048009	19/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
2858	00048010	19/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2859	00048011	19/02/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
2860	00048012	19/02/2017	\$0.00	\$2.00	\$2.00	\$2.00	\$0.00	\$0.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2861	00048013	19/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2862	00048014	19/02/2017	\$35.00	\$6.00	\$41.00	\$0.00	\$0.00	\$41.00	
2863	00048015	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2864	00048016	19/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2865	00048017	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2866	00048018	19/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2867	00048019	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2868	00048020	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2869	00048021	19/02/2017	\$57.00	\$0.00	\$57.00	\$0.00	\$0.00	\$57.00	
2870	00048022	19/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2871	00048023	19/02/2017	\$10.00	\$135.00	\$145.00	\$0.00	\$0.00	\$145.00	
2872	00048024	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2873	00048025	19/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2874	00048026	19/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
2875	00048027	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2876	00048028	19/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2877	00048029	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2878	00048030	19/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2879	00048031	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2880	00048032	19/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
2881	00048033	19/02/2017	\$10.00	\$40.00	\$50.00	\$0.00	\$0.00	\$50.00	
2882	00048034	19/02/2017	\$10.00	\$17.50	\$27.50	\$0.00	\$0.00	\$27.50	
2883	00048035	19/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2884	00048036	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2885	00048037	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2886	00048038	19/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2887	00048039	19/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2888	00048040	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2889	00048041	19/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
2890	00048042	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2891	00048043	19/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2892	00048044	19/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2893	00048045	19/02/2017	\$0.00	\$122.00	\$122.00	\$2.00	\$0.00	\$120.00	
2894	00048046	19/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2895	00048047	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2896	00048048	20/02/2017	\$20.00	\$8.00	\$28.00	\$0.00	\$0.00	\$28.00	
2897	00048049	20/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
2898	00048050	20/02/2017	\$0.00	\$1.00	\$1.00	\$0.00	\$0.00	\$1.00	
2899	00048051	20/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2900	00048052	20/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
2901	00048053	20/02/2017	\$10.00	\$1.00	\$11.00	\$0.00	\$0.00	\$11.00	
2902	00048054	20/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2903	00048055	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2904	00048056	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2905	00048057	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2906	00048058	20/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
2907	00048059	20/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2908	00048060	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2909	00048061	20/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
2910	00048062	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2911	00048063	20/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2912	00048064	20/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2913	00048065	20/02/2017	\$0.00	\$1.00	\$1.00	\$1.00	\$0.00	\$0.00	
2914	00048066	20/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2915	00048067	20/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2916	00048068	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2917	00048069	20/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2918	00048070	20/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2919	00048071	20/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2920	00048072	20/02/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
2921	00048073	20/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
2922	00048074	20/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2923	00048075	20/02/2017	\$11.50	\$19.00	\$30.50	\$0.00	\$0.00	\$30.50	
2924	00048076	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2925	00048077	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2926	00048078	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2927	00048079	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2928	00048080	20/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2929	00048081	20/02/2017	\$112.00	\$5.00	\$117.00	\$0.00	\$0.00	\$117.00	
2930	00048082	20/02/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
2931	00048083	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2932	00048084	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2933	00048085	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2934	00048086	20/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
2935	00048087	20/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
2936	00048088	20/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2937	00048089	20/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
2938	00048090	20/02/2017	\$10.00	\$5.60	\$15.60	\$0.00	\$0.00	\$15.60	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2939	00048091	20/02/2017	\$12.50	\$5.00	\$17.50	\$0.00	\$0.00	\$17.50	
2940	00048092	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2941	00048093	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2942	00048094	20/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2943	00048095	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2944	00048096	20/02/2017	\$10.00	\$23.00	\$33.00	\$0.00	\$0.00	\$33.00	
2945	00048097	20/02/2017	\$22.00	\$10.00	\$32.00	\$0.00	\$0.00	\$32.00	
2946	00048098	20/02/2017	\$32.00	\$3.00	\$35.00	\$0.00	\$0.00	\$35.00	
2947	00048099	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2948	00048100	20/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2949	00048101	20/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
2950	00048102	20/02/2017	\$0.00	\$13.00	\$13.00	\$0.00	\$0.00	\$13.00	
2951	00048103	20/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
2952	00048104	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2953	00048105	20/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2954	00048106	20/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2955	00048107	20/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
2956	00048108	20/02/2017	\$10.00	\$27.00	\$37.00	\$0.00	\$0.00	\$37.00	
2957	00048109	20/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
2958	00048110	20/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
2959	00048111	20/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2960	00048112	20/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2961	00048113	20/02/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
2962	00048114	20/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2963	00048115	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2964	00048116	20/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2965	00048117	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2966	00048118	20/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2967	00048119	20/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2968	00048120	20/02/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
2969	00048121	20/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2970	00048122	20/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2971	00048123	20/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2972	00048124	20/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
2973	00048125	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2974	00048126	20/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
2975	00048127	20/02/2017	\$0.00	\$21.00	\$21.00	\$0.00	\$0.00	\$21.00	
2976	00048128	20/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2977	00048129	20/02/2017	\$0.00	\$98.00	\$98.00	\$0.00	\$0.00	\$98.00	
2978	00048130	20/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
2979	00048131	20/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2980	00048132	20/02/2017	\$30.00	\$8.00	\$38.00	\$0.00	\$0.00	\$38.00	
2981	00048133	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2982	00048134	21/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2983	00048135	21/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
2984	00048136	21/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2985	00048137	21/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
2986	00048138	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2987	00048139	21/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
2988	00048140	21/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
2989	00048141	21/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
2990	00048142	21/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
2991	00048143	21/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
2992	00048144	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2993	00048145	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2994	00048146	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2995	00048147	21/02/2017	\$10.00	\$7.20	\$17.20	\$0.00	\$0.00	\$17.20	
2996	00048148	21/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
2997	00048149	21/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
2998	00048150	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
2999	00048151	21/02/2017	\$10.00	\$31.00	\$41.00	\$0.00	\$0.00	\$41.00	
3000	00048152	21/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
3001	00048153	21/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
3002	00048154	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3003	00048155	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3004	00048156	21/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3005	00048157	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3006	00048158	21/02/2017	\$0.00	\$12.00	\$12.00	\$0.00	\$0.00	\$12.00	
3007	00048159	21/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3008	00048160	21/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3009	00048161	21/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3010	00048162	21/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3011	00048163	21/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3012	00048164	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3013	00048165	21/02/2017	\$10.00	\$41.00	\$51.00	\$0.00	\$0.00	\$51.00	
3014	00048166	21/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3015	00048167	21/02/2017	\$40.00	\$4.00	\$44.00	\$0.00	\$0.00	\$44.00	
3016	00048168	21/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3017	00048169	21/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3018	00048170	21/02/2017	\$260.00	\$6.00	\$266.00	\$0.00	\$0.00	\$266.00	
3019	00048171	21/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3020	00048172	21/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3021	00048173	21/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3022	00048174	21/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3023	00048175	21/02/2017	\$11.50	\$10.00	\$21.50	\$0.00	\$0.00	\$21.50	
3024	00048176	21/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3025	00048177	21/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
3026	00048178	21/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3027	00048179	21/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3028	00048180	21/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3029	00048181	21/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3030	00048182	21/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3031	00048183	21/02/2017	\$10.00	\$27.00	\$37.00	\$0.00	\$0.00	\$37.00	
3032	00048184	21/02/2017	\$12.00	\$0.00	\$12.00	\$0.00	\$0.00	\$12.00	
3033	00048185	21/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3034	00048186	21/02/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
3035	00048187	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3036	00048188	21/02/2017	\$10.00	\$24.00	\$34.00	\$0.00	\$0.00	\$34.00	
3037	00048189	21/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3038	00048190	21/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3039	00048191	21/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3040	00048192	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3041	00048193	21/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3042	00048194	21/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3043	00048195	21/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3044	00048196	21/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3045	00048197	21/02/2017	\$0.00	\$349.00	\$349.00	\$0.00	\$0.00	\$349.00	
3046	00048198	21/02/2017	\$55.00	\$10.00	\$65.00	\$0.00	\$0.00	\$65.00	
3047	00048199	21/02/2017	\$210.00	\$7.00	\$217.00	\$0.00	\$0.00	\$217.00	
3048	00048200	21/02/2017	\$12.00	\$11.00	\$23.00	\$0.00	\$0.00	\$23.00	
3049	00048201	22/02/2017	\$50.00	\$4.00	\$54.00	\$0.00	\$0.00	\$54.00	
3050	00048202	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3051	00048203	22/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3052	00048204	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3053	00048205	22/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
3054	00048206	22/02/2017	\$15.00	\$6.00	\$21.00	\$0.00	\$0.00	\$21.00	
3055	00048207	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3056	00048208	22/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3057	00048209	22/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3058	00048210	22/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3059	00048211	22/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3060	00048212	22/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3061	00048213	22/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3062	00048214	22/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3063	00048215	22/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3064	00048216	22/02/2017	\$60.00	\$9.00	\$69.00	\$0.00	\$0.00	\$69.00	
3065	00048217	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3066	00048218	22/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3067	00048219	22/02/2017	\$15.00	\$0.00	\$15.00	\$0.00	\$0.00	\$15.00	
3068	00048220	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3069	00048221	22/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3070	00048222	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3071	00048223	22/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3072	00048224	22/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3073	00048225	22/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3074	00048226	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3075	00048227	22/02/2017	\$185.00	\$6.00	\$191.00	\$0.00	\$0.00	\$191.00	
3076	00048228	22/02/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
3077	00048229	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3078	00048230	22/02/2017	\$30.00	\$1.00	\$31.00	\$0.00	\$0.00	\$31.00	
3079	00048231	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3080	00048232	22/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3081	00048233	22/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3082	00048234	22/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3083	00048235	22/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3084	00048236	22/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3085	00048237	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3086	00048238	22/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3087	00048239	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3088	00048240	22/02/2017	\$10.00	\$23.00	\$33.00	\$0.00	\$0.00	\$33.00	
3089	00048241	22/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3090	00048242	22/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3091	00048243	22/02/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
3092	00048244	22/02/2017	\$0.00	\$12.00	\$12.00	\$0.00	\$0.00	\$12.00	
3093	00048245	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3094	00048246	22/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3095	00048247	22/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3096	00048248	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3097	00048249	22/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3098	00048250	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3099	00048251	22/02/2017	\$15.00	\$8.50	\$23.50	\$0.00	\$0.00	\$23.50	
3100	00048252	22/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3101	00048253	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3102	00048254	22/02/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
3103	00048255	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3104	00048256	22/02/2017	\$25.00	\$5.00	\$30.00	\$0.00	\$0.00	\$30.00	
3105	00048257	22/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3106	00048258	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3107	00048259	22/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3108	00048260	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3109	00048261	22/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3110	00048262	22/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
3111	00048263	22/02/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
3112	00048264	22/02/2017	\$10.00	\$2.50	\$12.50	\$0.00	\$0.00	\$12.50	
3113	00048265	22/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3114	00048266	22/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3115	00048267	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3116	00048268	22/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3117	00048269	22/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3118	00048270	22/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3119	00048271	22/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3120	00048272	22/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3121	00048273	22/02/2017	\$0.00	\$72.00	\$72.00	\$0.00	\$0.00	\$72.00	
3122	00048274	22/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3123	00048275	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3124	00048276	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3125	00048277	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3126	00048278	23/02/2017	\$10.00	\$40.00	\$50.00	\$0.00	\$0.00	\$50.00	
3127	00048279	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3128	00048280	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3129	00048281	23/02/2017	\$32.00	\$9.00	\$41.00	\$0.00	\$0.00	\$41.00	
3130	00048282	23/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3131	00048283	23/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3132	00048284	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3133	00048285	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3134	00048286	23/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3135	00048287	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3136	00048288	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3137	00048289	23/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3138	00048290	23/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3139	00048291	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3140	00048292	23/02/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
3141	00048293	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3142	00048294	23/02/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
3143	00048295	23/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3144	00048296	23/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3145	00048297	23/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3146	00048298	23/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3147	00048299	23/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3148	00048300	23/02/2017	\$50.00	\$4.00	\$54.00	\$0.00	\$0.00	\$54.00	
3149	00048301	23/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3150	00048302	23/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3151	00048303	23/02/2017	\$10.00	\$46.00	\$56.00	\$0.00	\$0.00	\$56.00	
3152	00048304	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3153	00048305	23/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3154	00048306	23/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3155	00048307	23/02/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
3156	00048308	23/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3157	00048309	23/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3158	00048310	23/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3159	00048311	23/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3160	00048312	23/02/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
3161	00048313	23/02/2017	\$0.00	\$4.00	\$4.00	\$4.00	\$0.00	\$0.00	
3162	00048314	23/02/2017	\$110.00	\$0.00	\$110.00	\$0.00	\$0.00	\$110.00	
3163	00048315	23/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3164	00048316	23/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3165	00048317	23/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
3166	00048318	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3167	00048319	23/02/2017	\$10.00	\$23.00	\$33.00	\$0.00	\$0.00	\$33.00	
3168	00048320	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3169	00048321	23/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3170	00048322	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3171	00048323	23/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3172	00048324	23/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3173	00048325	23/02/2017	\$35.00	\$28.00	\$63.00	\$0.00	\$0.00	\$63.00	
3174	00048326	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3175	00048327	23/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3176	00048328	23/02/2017	\$11.50	\$9.40	\$20.90	\$0.00	\$0.00	\$20.90	
3177	00048329	23/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3178	00048330	23/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3179	00048331	23/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3180	00048332	23/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3181	00048333	23/02/2017	\$160.00	\$5.00	\$165.00	\$0.00	\$0.00	\$165.00	
3182	00048334	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3183	00048335	23/02/2017	\$12.00	\$11.00	\$23.00	\$0.00	\$0.00	\$23.00	
3184	00048336	23/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
3185	00048337	23/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3186	00048338	23/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
3187	00048339	23/02/2017	\$12.00	\$10.00	\$22.00	\$0.00	\$0.00	\$22.00	
3188	00048340	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3189	00048341	23/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3190	00048342	23/02/2017	\$25.00	\$5.00	\$30.00	\$0.00	\$0.00	\$30.00	
3191	00048343	23/02/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
3192	00048344	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3193	00048345	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3194	00048346	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3195	00048347	23/02/2017	\$10.00	\$5.80	\$15.80	\$0.00	\$0.00	\$15.80	
3196	00048348	23/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3197	00048349	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3198	00048350	23/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3199	00048351	23/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3200	00048352	23/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3201	00048353	23/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3202	00048354	23/02/2017	\$0.00	\$171.00	\$171.00	\$0.00	\$0.00	\$171.00	
3203	00048355	23/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3204	00048356	24/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
3205	00048357	24/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3206	00048358	24/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3207	00048359	24/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3208	00048360	24/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3209	00048361	24/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3210	00048362	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3211	00048363	24/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3212	00048364	24/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3213	00048365	24/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3214	00048366	24/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3215	00048367	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3216	00048368	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3217	00048369	24/02/2017	\$0.00	\$9.00	\$9.00	\$0.00	\$0.00	\$9.00	
3218	00048370	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3219	00048371	24/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3220	00048372	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3221	00048373	24/02/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
3222	00048374	24/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3223	00048375	24/02/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
3224	00048376	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3225	00048377	24/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3226	00048378	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3227	00048379	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3228	00048380	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3229	00048381	24/02/2017	\$15.00	\$8.00	\$23.00	\$0.00	\$0.00	\$23.00	
3230	00048382	24/02/2017	\$32.00	\$0.00	\$32.00	\$0.00	\$0.00	\$32.00	
3231	00048383	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3232	00048384	24/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3233	00048385	24/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3234	00048386	24/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3235	00048387	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3236	00048388	24/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3237	00048389	24/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3238	00048390	24/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3239	00048391	24/02/2017	\$20.00	\$4.00	\$24.00	\$0.00	\$0.00	\$24.00	
3240	00048392	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3241	00048393	24/02/2017	\$10.00	\$26.00	\$36.00	\$0.00	\$0.00	\$36.00	
3242	00048394	24/02/2017	\$12.00	\$3.00	\$15.00	\$0.00	\$0.00	\$15.00	
3243	00048395	24/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3244	00048396	24/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3245	00048397	24/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3246	00048398	24/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3247	00048399	24/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3248	00048400	24/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3249	00048401	24/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3250	00048402	24/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3251	00048403	24/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
3252	00048404	24/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3253	00048405	24/02/2017	\$35.00	\$11.00	\$46.00	\$0.00	\$0.00	\$46.00	
3254	00048406	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3255	00048407	24/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3256	00048408	24/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
3257	00048409	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3258	00048410	24/02/2017	\$50.00	\$0.00	\$50.00	\$0.00	\$0.00	\$50.00	
3259	00048411	24/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3260	00048412	24/02/2017	\$15.00	\$9.00	\$24.00	\$0.00	\$0.00	\$24.00	
3261	00048413	24/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
3262	00048414	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3263	00048415	24/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3264	00048416	24/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3265	00048417	24/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3266	00048418	24/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3267	00048419	24/02/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3268	00048420	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3269	00048421	24/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3270	00048422	24/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3271	00048423	24/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3272	00048424	24/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3273	00048425	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3274	00048426	24/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3275	00048427	24/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3276	00048428	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3277	00048429	24/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3278	00048430	24/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3279	00048431	24/02/2017	\$0.00	\$148.00	\$148.00	\$0.00	\$0.00	\$148.00	
3280	00048432	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3281	00048433	25/02/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
3282	00048434	25/02/2017	\$0.00	\$2.00	\$2.00	\$0.00	\$0.00	\$2.00	
3283	00048435	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3284	00048436	25/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3285	00048437	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3286	00048438	25/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3287	00048439	25/02/2017	\$13.50	\$5.00	\$18.50	\$0.00	\$0.00	\$18.50	
3288	00048440	25/02/2017	\$40.00	\$18.00	\$58.00	\$0.00	\$0.00	\$58.00	
3289	00048441	25/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3290	00048442	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3291	00048443	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3292	00048444	25/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3293	00048445	25/02/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
3294	00048446	25/02/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
3295	00048447	25/02/2017	\$35.00	\$17.00	\$52.00	\$0.00	\$0.00	\$52.00	
3296	00048448	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3297	00048449	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3298	00048450	25/02/2017	\$35.00	\$10.00	\$45.00	\$0.00	\$0.00	\$45.00	
3299	00048451	25/02/2017	\$60.00	\$9.00	\$69.00	\$0.00	\$0.00	\$69.00	
3300	00048452	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3301	00048453	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3302	00048454	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3303	00048455	25/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3304	00048456	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3305	00048457	25/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3306	00048458	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3307	00048459	25/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3308	00048460	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3309	00048461	25/02/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
3310	00048462	25/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3311	00048463	25/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3312	00048464	25/02/2017	\$27.00	\$10.00	\$37.00	\$0.00	\$0.00	\$37.00	
3313	00048465	25/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3314	00048466	25/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3315	00048467	25/02/2017	\$10.00	\$2.00	\$12.00	\$0.00	\$0.00	\$12.00	
3316	00048468	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3317	00048469	25/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3318	00048470	25/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
3319	00048471	25/02/2017	\$210.00	\$5.00	\$215.00	\$0.00	\$0.00	\$215.00	
3320	00048472	25/02/2017	\$200.00	\$0.00	\$200.00	\$0.00	\$0.00	\$200.00	
3321	00048473	25/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3322	00048474	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3323	00048475	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3324	00048476	25/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3325	00048477	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3326	00048478	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3327	00048479	25/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
3328	00048480	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3329	00048481	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3330	00048482	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3331	00048483	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3332	00048484	25/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3333	00048485	25/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3334	00048486	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3335	00048487	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3336	00048488	25/02/2017	\$10.00	\$29.50	\$39.50	\$0.00	\$0.00	\$39.50	
3337	00048489	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3338	00048490	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3339	00048491	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3340	00048492	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3341	00048493	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3342	00048494	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3343	00048495	25/02/2017	\$200.00	\$5.00	\$205.00	\$0.00	\$0.00	\$205.00	
3344	00048496	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3345	00048497	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3346	00048498	25/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
3347	00048499	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3348	00048500	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3349	00048501	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3350	00048502	25/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3351	00048503	25/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3352	00048504	25/02/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
3353	00048505	25/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3354	00048506	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3355	00048507	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3356	00048508	25/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3357	00048509	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3358	00048510	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3359	00048511	25/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3360	00048512	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3361	00048513	25/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
3362	00048514	25/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3363	00048515	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3364	00048516	25/02/2017	\$10.00	\$5.10	\$15.10	\$0.00	\$0.00	\$15.10	
3365	00048517	25/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3366	00048518	25/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3367	00048519	25/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3368	00048520	25/02/2017	\$12.50	\$5.00	\$17.50	\$0.00	\$0.00	\$17.50	
3369	00048521	25/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3370	00048522	25/02/2017	\$11.50	\$13.00	\$24.50	\$0.00	\$0.00	\$24.50	
3371	00048523	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3372	00048524	25/02/2017	\$32.00	\$11.00	\$43.00	\$0.00	\$0.00	\$43.00	
3373	00048525	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3374	00048526	25/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3375	00048527	25/02/2017	\$14.50	\$4.00	\$18.50	\$0.00	\$0.00	\$18.50	
3376	00048528	26/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3377	00048529	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3378	00048530	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3379	00048531	26/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3380	00048532	26/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3381	00048533	26/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3382	00048534	26/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3383	00048535	26/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3384	00048536	26/02/2017	\$0.00	\$2.00	\$2.00	\$0.00	\$0.00	\$2.00	
3385	00048537	26/02/2017	\$25.00	\$12.00	\$37.00	\$0.00	\$0.00	\$37.00	
3386	00048538	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3387	00048539	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3388	00048540	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3389	00048541	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3390	00048542	26/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3391	00048543	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3392	00048544	26/02/2017	\$10.00	\$33.40	\$43.40	\$0.00	\$0.00	\$43.40	
3393	00048545	26/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3394	00048546	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3395	00048547	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3396	00048548	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3397	00048549	26/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3398	00048550	26/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3399	00048551	26/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3400	00048552	26/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3401	00048553	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3402	00048554	26/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3403	00048555	26/02/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
3404	00048556	26/02/2017	\$10.00	\$11.50	\$21.50	\$0.00	\$0.00	\$21.50	
3405	00048557	26/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3406	00048558	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3407	00048559	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3408	00048560	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3409	00048561	26/02/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3410	00048562	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3411	00048563	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3412	00048564	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3413	00048565	26/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3414	00048566	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3415	00048567	26/02/2017	\$0.00	\$17.00	\$17.00	\$0.00	\$0.00	\$17.00	
3416	00048568	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3417	00048569	26/02/2017	\$10.00	\$15.50	\$25.50	\$0.00	\$0.00	\$25.50	
3418	00048570	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3419	00048571	26/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3420	00048572	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3421	00048573	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3422	00048574	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3423	00048575	26/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3424	00048576	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3425	00048577	26/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3426	00048578	26/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3427	00048579	26/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3428	00048580	26/02/2017	\$10.00	\$11.50	\$21.50	\$0.00	\$0.00	\$21.50	
3429	00048581	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3430	00048582	26/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3431	00048583	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3432	00048584	26/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3433	00048585	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3434	00048586	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3435	00048587	26/02/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3436	00048588	26/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3437	00048589	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3438	00048590	26/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3439	00048591	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3440	00048592	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3441	00048593	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3442	00048594	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3443	00048595	26/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3444	00048596	26/02/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
3445	00048597	26/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3446	00048598	26/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3447	00048599	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3448	00048600	26/02/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
3449	00048601	26/02/2017	\$0.00	\$12.00	\$12.00	\$0.00	\$0.00	\$12.00	
3450	00048602	26/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3451	00048603	26/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3452	00048604	26/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3453	00048605	26/02/2017	\$10.00	\$6.50	\$16.50	\$0.00	\$0.00	\$16.50	
3454	00048606	26/02/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
3455	00048607	26/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3456	00048608	26/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3457	00048609	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3458	00048610	26/02/2017	\$55.00	\$8.00	\$63.00	\$0.00	\$0.00	\$63.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3459	00048611	26/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3460	00048612	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3461	00048613	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3462	00048614	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3463	00048615	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3464	00048616	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3465	00048617	26/02/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
3466	00048618	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3467	00048619	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3468	00048620	26/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3469	00048621	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3470	00048622	26/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3471	00048623	26/02/2017	\$10.00	\$6.50	\$16.50	\$0.00	\$0.00	\$16.50	
3472	00048624	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3473	00048625	26/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3474	00048626	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3475	00048627	26/02/2017	\$0.00	\$162.00	\$162.00	\$0.00	\$0.00	\$162.00	
3476	00048628	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3477	00048629	26/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3478	00048630	27/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3479	00048631	27/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3480	00048632	27/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3481	00048633	27/02/2017	\$15.00	\$12.50	\$27.50	\$0.00	\$0.00	\$27.50	
3482	00048634	27/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3483	00048635	27/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3484	00048636	27/02/2017	\$0.00	\$15.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3485	00048637	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3486	00048638	27/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3487	00048639	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3488	00048640	27/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3489	00048641	27/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3490	00048642	27/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3491	00048643	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3492	00048644	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3493	00048645	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3494	00048646	27/02/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
3495	00048647	27/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3496	00048648	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3497	00048649	27/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3498	00048650	27/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3499	00048651	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3500	00048652	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3501	00048653	27/02/2017	\$30.00	\$18.50	\$48.50	\$0.00	\$0.00	\$48.50	
3502	00048654	27/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3503	00048655	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3504	00048656	27/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3505	00048657	27/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3506	00048658	27/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3507	00048659	27/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3508	00048660	27/02/2017	\$15.00	\$14.00	\$29.00	\$0.00	\$0.00	\$29.00	
3509	00048661	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3510	00048662	27/02/2017	\$10.00	\$13.50	\$23.50	\$0.00	\$0.00	\$23.50	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3511	00048663	27/02/2017	\$15.00	\$6.00	\$21.00	\$0.00	\$0.00	\$21.00	
3512	00048664	27/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3513	00048665	27/02/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
3514	00048666	27/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
3515	00048667	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3516	00048668	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3517	00048669	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3518	00048670	27/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3519	00048671	27/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3520	00048672	27/02/2017	\$37.00	\$30.00	\$67.00	\$0.00	\$0.00	\$67.00	
3521	00048673	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3522	00048674	27/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3523	00048675	27/02/2017	\$35.00	\$5.00	\$40.00	\$0.00	\$0.00	\$40.00	
3524	00048676	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3525	00048677	27/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3526	00048678	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3527	00048679	27/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3528	00048680	27/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3529	00048681	27/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3530	00048682	27/02/2017	\$12.00	\$15.00	\$27.00	\$0.00	\$0.00	\$27.00	
3531	00048683	27/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3532	00048684	27/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3533	00048685	27/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3534	00048686	27/02/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
3535	00048687	27/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3536	00048688	27/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3537	00048689	27/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3538	00048690	27/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3539	00048691	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3540	00048692	27/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3541	00048693	27/02/2017	\$0.00	\$45.00	\$45.00	\$0.00	\$0.00	\$45.00	
3542	00048694	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3543	00048695	27/02/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3544	00048696	27/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3545	00048697	27/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3546	00048698	27/02/2017	\$30.00	\$20.00	\$50.00	\$0.00	\$0.00	\$50.00	
3547	00048699	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3548	00048700	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3549	00048701	28/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3550	00048702	28/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3551	00048703	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3552	00048704	28/02/2017	\$32.00	\$3.00	\$35.00	\$0.00	\$0.00	\$35.00	
3553	00048705	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3554	00048706	28/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3555	00048707	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3556	00048708	28/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3557	00048709	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3558	00048710	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3559	00048711	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3560	00048712	28/02/2017	\$10.00	\$6.50	\$16.50	\$0.00	\$0.00	\$16.50	
3561	00048713	28/02/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3562	00048714	28/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3563	00048715	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3564	00048716	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3565	00048717	28/02/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3566	00048718	28/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3567	00048719	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3568	00048720	28/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3569	00048721	28/02/2017	\$0.00	\$1,355.00	\$1,355.00	\$1,355.00	\$0.00	\$0.00	
3570	00048722	28/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3571	00048723	28/02/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3572	00048724	28/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3573	00048725	28/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3574	00048726	28/02/2017	\$50.00	\$16.00	\$66.00	\$0.00	\$0.00	\$66.00	
3575	00048727	28/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3576	00048728	28/02/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3577	00048729	28/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3578	00048730	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3579	00048731	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3580	00048732	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3581	00048733	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3582	00048734	28/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3583	00048735	28/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3584	00048736	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3585	00048737	28/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3586	00048738	28/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3587	00048739	28/02/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
3588	00048740	28/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

MENG -RUTNIN EYE SPECIALIS

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3589	00048741	28/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3590	00048742	28/02/2017	\$110.00	\$5.00	\$115.00	\$0.00	\$0.00	\$115.00	
3591	00048743	28/02/2017	\$0.00	\$6.00	\$6.00	\$0.00	\$0.00	\$6.00	
3592	00048744	28/02/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3593	00048745	28/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3594	00048746	28/02/2017	\$15.00	\$8.00	\$23.00	\$0.00	\$0.00	\$23.00	
3595	00048747	28/02/2017	\$10.00	\$11.00	\$21.00	\$21.00	\$0.00	\$0.00	
3596	00048748	28/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3597	00048749	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3598	00048750	28/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3599	00048751	28/02/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3600	00048752	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3601	00048753	28/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3602	00048754	28/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3603	00048755	28/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
3604	00048756	28/02/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
3605	00048757	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3606	00048758	28/02/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3607	00048759	28/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3608	00048760	28/02/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
3609	00048761	28/02/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3610	00048762	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3611	00048763	28/02/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3612	00048764	28/02/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3613	00048765	28/02/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3614	00048766	28/02/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3615	00048767	28/02/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
3616	00048768	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3617	00048769	28/02/2017	\$25.00	\$21.00	\$46.00	\$0.00	\$0.00	\$46.00	
3618	00048770	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3619	00048771	28/02/2017	\$25.00	\$21.00	\$46.00	\$0.00	\$0.00	\$46.00	
3620	00048772	28/02/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3621	00048773	28/02/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
3622	00048774	28/02/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3623	00048775	28/02/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
3624	00048776	28/02/2017	\$0.00	\$152.00	\$152.00	\$0.00	\$0.00	\$152.00	
3625	00048777	01/03/2017	\$50.00	\$3.00	\$53.00	\$0.00	\$0.00	\$53.00	
3626	00048778	01/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3627	00048779	01/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3628	00048780	01/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3629	00048781	01/03/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3630	00048782	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3631	00048783	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3632	00048784	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3633	00048785	01/03/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3634	00048786	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3635	00048787	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3636	00048788	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3637	00048789	01/03/2017	\$40.00	\$5.00	\$45.00	\$0.00	\$0.00	\$45.00	
3638	00048790	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3639	00048791	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3640	00048792	01/03/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3641	00048793	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3642	00048794	01/03/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
3643	00048795	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3644	00048796	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3645	00048797	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3646	00048798	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3647	00048799	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3648	00048800	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3649	00048801	01/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3650	00048802	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3651	00048803	01/03/2017	\$40.00	\$14.00	\$54.00	\$0.00	\$0.00	\$54.00	
3652	00048804	01/03/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
3653	00048805	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3654	00048806	01/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3655	00048807	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3656	00048808	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3657	00048809	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3658	00048810	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3659	00048811	01/03/2017	\$40.00	\$7.50	\$47.50	\$0.00	\$0.00	\$47.50	
3660	00048812	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3661	00048813	01/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3662	00048814	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3663	00048815	01/03/2017	\$15.00	\$7.00	\$22.00	\$0.00	\$0.00	\$22.00	
3664	00048816	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3665	00048817	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3666	00048818	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3667	00048819	01/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3668	00048820	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3669	00048821	01/03/2017	\$0.00	\$2.00	\$2.00	\$0.00	\$0.00	\$2.00	
3670	00048822	01/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3671	00048823	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3672	00048824	01/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3673	00048825	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3674	00048826	01/03/2017	\$10.00	\$4.90	\$14.90	\$0.00	\$0.00	\$14.90	
3675	00048827	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3676	00048828	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3677	00048829	01/03/2017	\$15.00	\$8.50	\$23.50	\$0.00	\$0.00	\$23.50	
3678	00048830	01/03/2017	\$55.00	\$5.00	\$60.00	\$0.00	\$0.00	\$60.00	
3679	00048831	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3680	00048832	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3681	00048833	01/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3682	00048834	01/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3683	00048835	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3684	00048836	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3685	00048837	01/03/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
3686	00048838	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3687	00048839	01/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3688	00048840	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3689	00048841	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3690	00048842	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3691	00048843	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3692	00048844	01/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3693	00048845	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3694	00048846	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3695	00048847	01/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3696	00048848	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3697	00048849	01/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3698	00048850	01/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3699	00048851	01/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3700	00048852	01/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3701	00048853	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3702	00048854	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3703	00048855	01/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3704	00048856	01/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3705	00048857	01/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3706	00048858	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3707	00048859	01/03/2017	\$40.00	\$4.00	\$44.00	\$0.00	\$0.00	\$44.00	
3708	00048860	01/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3709	00048861	01/03/2017	\$12.00	\$11.00	\$23.00	\$0.00	\$0.00	\$23.00	
3710	00048862	01/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3711	00048863	01/03/2017	\$10.00	\$25.00	\$35.00	\$0.00	\$0.00	\$35.00	
3712	00048864	01/03/2017	\$0.00	\$98.00	\$98.00	\$0.00	\$0.00	\$98.00	
3713	00048865	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3714	00048866	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3715	00048867	02/03/2017	\$10.00	\$28.00	\$38.00	\$0.00	\$0.00	\$38.00	
3716	00048868	02/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3717	00048869	02/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3718	00048870	02/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3719	00048871	02/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3720	00048872	02/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3721	00048873	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3722	00048874	02/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3723	00048875	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3724	00048876	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3725	00048877	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3726	00048878	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3727	00048879	02/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3728	00048880	02/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3729	00048881	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3730	00048882	02/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3731	00048883	02/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3732	00048884	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3733	00048885	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3734	00048886	02/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3735	00048887	02/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3736	00048888	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3737	00048889	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3738	00048890	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3739	00048891	02/03/2017	\$0.00	\$6.00	\$6.00	\$6.00	\$0.00	\$0.00	
3740	00048892	02/03/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
3741	00048893	02/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3742	00048894	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3743	00048895	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3744	00048896	02/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3745	00048897	02/03/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
3746	00048898	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3747	00048899	02/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3748	00048900	02/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3749	00048901	02/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3750	00048902	02/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3751	00048903	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3752	00048904	02/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3753	00048905	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3754	00048906	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3755	00048907	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3756	00048908	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3757	00048909	02/03/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
3758	00048910	02/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3759	00048911	02/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3760	00048912	02/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3761	00048913	02/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3762	00048914	02/03/2017	\$0.00	\$105.00	\$105.00	\$0.00	\$0.00	\$105.00	
3763	00048915	03/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3764	00048916	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3765	00048917	03/03/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3766	00048918	03/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3767	00048919	03/03/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3768	00048920	03/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3769	00048921	03/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3770	00048922	03/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3771	00048923	03/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3772	00048924	03/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3773	00048925	03/03/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
3774	00048926	03/03/2017	\$85.00	\$8.00	\$93.00	\$0.00	\$0.00	\$93.00	
3775	00048927	03/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3776	00048928	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3777	00048929	03/03/2017	\$110.00	\$9.00	\$119.00	\$0.00	\$0.00	\$119.00	
3778	00048930	03/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3779	00048931	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3780	00048932	03/03/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
3781	00048933	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3782	00048934	03/03/2017	\$20.00	\$5.00	\$25.00	\$0.00	\$0.00	\$25.00	
3783	00048935	03/03/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
3784	00048936	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3785	00048937	03/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3786	00048938	03/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3787	00048939	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3788	00048940	03/03/2017	\$15.00	\$11.00	\$26.00	\$0.00	\$0.00	\$26.00	
3789	00048941	03/03/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
3790	00048942	03/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3791	00048943	03/03/2017	\$0.00	\$1.00	\$1.00	\$1.00	\$0.00	\$0.00	
3792	00048944	03/03/2017	\$40.00	\$4.00	\$44.00	\$0.00	\$0.00	\$44.00	
3793	00048945	03/03/2017	\$22.00	\$20.00	\$42.00	\$0.00	\$0.00	\$42.00	
3794	00048946	03/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3795	00048947	03/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3796	00048948	03/03/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3797	00048949	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3798	00048950	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3799	00048951	03/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3800	00048952	03/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3801	00048953	03/03/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
3802	00048954	03/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3803	00048955	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3804	00048956	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3805	00048957	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3806	00048958	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3807	00048959	03/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3808	00048960	03/03/2017	\$10.00	\$12.50	\$22.50	\$0.00	\$0.00	\$22.50	
3809	00048961	03/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3810	00048962	03/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3811	00048963	03/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3812	00048964	03/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3813	00048965	03/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3814	00048966	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3815	00048967	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3816	00048968	03/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3817	00048969	03/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3818	00048970	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3819	00048971	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3820	00048972	03/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3821	00048973	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3822	00048974	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3823	00048975	03/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3824	00048976	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3825	00048977	03/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3826	00048978	03/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3827	00048979	03/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3828	00048980	03/03/2017	\$0.00	\$121.00	\$121.00	\$0.00	\$0.00	\$121.00	
3829	00048981	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3830	00048982	04/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3831	00048983	04/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3832	00048984	04/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3833	00048985	04/03/2017	\$15.00	\$4.00	\$19.00	\$0.00	\$0.00	\$19.00	
3834	00048986	04/03/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3835	00048987	04/03/2017	\$10.00	\$1.50	\$11.50	\$0.00	\$0.00	\$11.50	
3836	00048988	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3837	00048989	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3838	00048990	04/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3839	00048991	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3840	00048992	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3841	00048993	04/03/2017	\$10.00	\$22.80	\$32.80	\$0.00	\$0.00	\$32.80	
3842	00048994	04/03/2017	\$11.50	\$11.00	\$22.50	\$0.00	\$0.00	\$22.50	
3843	00048995	04/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3844	00048996	04/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3845	00048997	04/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3846	00048998	04/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3847	00048999	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3848	00049000	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3849	00049001	04/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3850	00049002	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3851	00049003	04/03/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3852	00049004	04/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3853	00049005	04/03/2017	\$15.00	\$5.00	\$20.00	\$0.00	\$0.00	\$20.00	
3854	00049006	04/03/2017	\$15.00	\$3.00	\$18.00	\$0.00	\$0.00	\$18.00	
3855	00049007	04/03/2017	\$10.00	\$19.10	\$29.10	\$0.10	\$0.00	\$29.00	
3856	00049008	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3857	00049009	04/03/2017	\$160.00	\$5.00	\$165.00	\$0.00	\$0.00	\$165.00	
3858	00049010	04/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3859	00049011	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3860	00049012	04/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3861	00049013	04/03/2017	\$10.00	\$11.50	\$21.50	\$0.00	\$0.00	\$21.50	
3862	00049014	04/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3863	00049015	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3864	00049016	04/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3865	00049017	04/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3866	00049018	04/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3867	00049019	04/03/2017	\$35.00	\$25.00	\$60.00	\$0.00	\$0.00	\$60.00	
3868	00049020	04/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3869	00049021	04/03/2017	\$155.00	\$5.00	\$160.00	\$0.00	\$0.00	\$160.00	
3870	00049022	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3871	00049023	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3872	00049024	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3873	00049025	04/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3874	00049026	04/03/2017	\$30.00	\$9.00	\$39.00	\$0.00	\$0.00	\$39.00	

MENG -RUTNIN EYE SPECIALIS

Clinic Incom Sumary

From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3875	00049027	04/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3876	00049028	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3877	00049029	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3878	00049030	04/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3879	00049031	04/03/2017	\$35.00	\$3.00	\$38.00	\$0.00	\$0.00	\$38.00	
3880	00049032	04/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3881	00049033	04/03/2017	\$0.00	\$3.00	\$3.00	\$3.00	\$0.00	\$0.00	
3882	00049034	04/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3883	00049035	04/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3884	00049036	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3885	00049037	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3886	00049038	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3887	00049039	04/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3888	00049040	04/03/2017	\$60.00	\$9.00	\$69.00	\$0.00	\$0.00	\$69.00	
3889	00049041	04/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3890	00049042	04/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3891	00049043	04/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3892	00049044	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3893	00049045	04/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3894	00049046	04/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3895	00049047	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3896	00049048	04/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3897	00049049	04/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3898	00049050	04/03/2017	\$10.00	\$18.00	\$28.00	\$0.00	\$0.00	\$28.00	
3899	00049051	04/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3900	00049052	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3901	00049053	05/03/2017	\$10.00	\$14.00	\$24.00	\$0.00	\$0.00	\$24.00	
3902	00049054	05/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3903	00049055	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3904	00049056	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3905	00049057	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3906	00049058	05/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3907	00049059	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3908	00049060	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3909	00049061	05/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3910	00049062	05/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3911	00049063	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3912	00049064	05/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3913	00049065	05/03/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
3914	00049066	05/03/2017	\$10.00	\$16.50	\$26.50	\$0.00	\$0.00	\$26.50	
3915	00049067	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3916	00049068	05/03/2017	\$0.00	\$4.00	\$4.00	\$0.00	\$0.00	\$4.00	
3917	00049069	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3918	00049070	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3919	00049071	05/03/2017	\$20.00	\$9.00	\$29.00	\$0.00	\$0.00	\$29.00	
3920	00049072	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3921	00049073	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3922	00049074	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3923	00049075	05/03/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
3924	00049076	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3925	00049077	05/03/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
3926	00049078	05/03/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3927	00049079	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3928	00049080	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3929	00049081	05/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3930	00049082	05/03/2017	\$260.00	\$6.00	\$266.00	\$0.00	\$0.00	\$266.00	
3931	00049083	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3932	00049084	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3933	00049085	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3934	00049086	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3935	00049087	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3936	00049088	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3937	00049089	05/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3938	00049090	05/03/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3939	00049091	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3940	00049092	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3941	00049093	05/03/2017	\$0.00	\$9.00	\$9.00	\$0.00	\$0.00	\$9.00	
3942	00049094	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3943	00049095	05/03/2017	\$11.50	\$5.00	\$16.50	\$0.00	\$0.00	\$16.50	
3944	00049096	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3945	00049097	05/03/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
3946	00049098	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3947	00049099	05/03/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
3948	00049100	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3949	00049101	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3950	00049102	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3951	00049103	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3952	00049104	05/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3953	00049105	05/03/2017	\$10.00	\$10.50	\$20.50	\$0.00	\$0.00	\$20.50	
3954	00049106	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3955	00049107	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3956	00049108	05/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
3957	00049109	05/03/2017	\$10.00	\$13.50	\$23.50	\$0.00	\$0.00	\$23.50	
3958	00049110	05/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
3959	00049111	05/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3960	00049112	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3961	00049113	05/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
3962	00049114	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3963	00049115	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3964	00049116	05/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3965	00049117	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3966	00049118	05/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3967	00049119	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3968	00049120	05/03/2017	\$20.00	\$0.00	\$20.00	\$0.00	\$0.00	\$20.00	
3969	00049121	05/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3970	00049122	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3971	00049123	05/03/2017	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00	\$8.00	
3972	00049124	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3973	00049125	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3974	00049126	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3975	00049127	05/03/2017	\$12.00	\$21.00	\$33.00	\$0.00	\$0.00	\$33.00	
3976	00049128	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3977	00049129	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3978	00049130	05/03/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
3979	00049131	05/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
3980	00049132	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3981	00049133	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3982	00049134	05/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
3983	00049135	05/03/2017	\$15.00	\$12.50	\$27.50	\$0.00	\$0.00	\$27.50	
3984	00049136	05/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
3985	00049137	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3986	00049138	05/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
3987	00049139	05/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
3988	00049140	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
3989	00049141	05/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3990	00049142	05/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
3991	00049143	05/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
3992	00049144	05/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
3993	00049145	05/03/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
3994	00049146	05/03/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
3995	00049147	05/03/2017	\$11.50	\$10.00	\$21.50	\$0.00	\$0.00	\$21.50	
3996	00049148	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
3997	00049149	05/03/2017	\$0.00	\$10.00	\$10.00	\$0.00	\$0.00	\$10.00	
3998	00049150	05/03/2017	\$0.00	\$11.00	\$11.00	\$0.00	\$0.00	\$11.00	
3999	00049151	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4000	00049152	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4001	00049153	05/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4002	00049154	05/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4003	00049155	05/03/2017	\$10.00	\$19.00	\$29.00	\$0.00	\$0.00	\$29.00	
4004	00049156	05/03/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4005	00049157	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4006	00049158	06/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
4007	00049159	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4008	00049160	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4009	00049161	06/03/2017	\$10.00	\$51.00	\$61.00	\$0.00	\$0.00	\$61.00	
4010	00049162	06/03/2017	\$0.00	\$11.00	\$11.00	\$11.00	\$0.00	\$0.00	
4011	00049163	06/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
4012	00049164	06/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4013	00049165	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4014	00049166	06/03/2017	\$0.00	\$12.00	\$12.00	\$0.00	\$0.00	\$12.00	
4015	00049167	06/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4016	00049168	06/03/2017	\$0.00	\$20.00	\$20.00	\$20.00	\$0.00	\$0.00	
4017	00049169	06/03/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
4018	00049170	06/03/2017	\$0.00	\$15.00	\$15.00	\$0.00	\$0.00	\$15.00	
4019	00049171	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4020	00049172	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4021	00049173	06/03/2017	\$10.00	\$16.00	\$26.00	\$0.00	\$0.00	\$26.00	
4022	00049174	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4023	00049175	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4024	00049176	06/03/2017	\$25.00	\$3.00	\$28.00	\$0.00	\$0.00	\$28.00	
4025	00049177	06/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4026	00049178	06/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4027	00049179	06/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
4028	00049180	06/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
4029	00049181	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4030	00049182	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4031	00049183	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4032	00049184	06/03/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
4033	00049185	06/03/2017	\$0.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00	
4034	00049186	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4035	00049187	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4036	00049188	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4037	00049189	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4038	00049190	06/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4039	00049191	06/03/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
4040	00049192	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4041	00049193	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4042	00049194	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4043	00049195	06/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
4044	00049196	06/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4045	00049197	06/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4046	00049198	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4047	00049199	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4048	00049200	06/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4049	00049201	06/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4050	00049202	06/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4051	00049203	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4052	00049204	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4053	00049205	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4054	00049206	06/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
4055	00049207	06/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4056	00049208	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	

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No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4057	00049209	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4058	00049210	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4059	00049211	06/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4060	00049212	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4061	00049213	06/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
4062	00049214	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4063	00049215	06/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
4064	00049216	06/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4065	00049217	06/03/2017	\$10.00	\$70.00	\$80.00	\$0.00	\$0.00	\$80.00	
4066	00049218	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4067	00049219	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4068	00049220	06/03/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
4069	00049221	06/03/2017	\$60.00	\$3.00	\$63.00	\$0.00	\$0.00	\$63.00	
4070	00049222	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4071	00049223	06/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4072	00049224	06/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4073	00049225	06/03/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
4074	00049226	06/03/2017	\$10.00	\$8.50	\$18.50	\$0.00	\$0.00	\$18.50	
4075	00049227	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4076	00049228	06/03/2017	\$10.00	\$20.00	\$30.00	\$0.00	\$0.00	\$30.00	
4077	00049229	06/03/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
4078	00049230	06/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
4079	00049231	06/03/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
4080	00049232	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4081	00049233	06/03/2017	\$10.00	\$14.50	\$24.50	\$0.00	\$0.00	\$24.50	
4082	00049234	06/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4083	00049235	06/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
4084	00049236	06/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4085	00049237	06/03/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
4086	00049238	06/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
4087	00049239	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4088	00049240	06/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
4089	00049241	06/03/2017	\$0.00	\$7.00	\$7.00	\$0.00	\$0.00	\$7.00	
4090	00049242	06/03/2017	\$30.00	\$5.00	\$35.00	\$0.00	\$0.00	\$35.00	
4091	00049243	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4092	00049244	06/03/2017	\$100.00	\$5.00	\$105.00	\$0.00	\$0.00	\$105.00	
4093	00049245	06/03/2017	\$60.00	\$5.00	\$65.00	\$0.00	\$0.00	\$65.00	
4094	00049246	06/03/2017	\$10.00	\$21.00	\$31.00	\$0.00	\$0.00	\$31.00	
4095	00049247	06/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
4096	00049248	06/03/2017	\$12.00	\$1.00	\$13.00	\$0.00	\$0.00	\$13.00	
4097	00049249	06/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4098	00049250	06/03/2017	\$10.00	\$31.00	\$41.00	\$0.00	\$0.00	\$41.00	
4099	00049251	06/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
4100	00049252	06/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4101	00049253	06/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
4102	00049254	06/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4103	00049255	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4104	00049256	06/03/2017	\$12.00	\$5.00	\$17.00	\$0.00	\$0.00	\$17.00	
4105	00049257	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4106	00049258	06/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4107	00049259	06/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4108	00049260	06/03/2017	\$100.00	\$0.00	\$100.00	\$0.00	\$0.00	\$100.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4109	00049261	06/03/2017	\$0.00	\$122.00	\$122.00	\$0.00	\$0.00	\$122.00	
4110	00049262	07/03/2017	\$60.00	\$4.00	\$64.00	\$0.00	\$0.00	\$64.00	
4111	00049263	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4112	00049264	07/03/2017	\$0.00	\$5.00	\$5.00	\$0.00	\$0.00	\$5.00	
4113	00049265	07/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
4114	00049266	07/03/2017	\$0.00	\$15.00	\$15.00	\$0.00	\$0.00	\$15.00	
4115	00049267	07/03/2017	\$10.00	\$12.00	\$22.00	\$0.00	\$0.00	\$22.00	
4116	00049268	07/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4117	00049269	07/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
4118	00049270	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4119	00049271	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4120	00049272	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4121	00049273	07/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4122	00049274	07/03/2017	\$10.00	\$13.00	\$23.00	\$0.00	\$0.00	\$23.00	
4123	00049275	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4124	00049276	07/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4125	00049277	07/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4126	00049278	07/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4127	00049279	07/03/2017	\$10.00	\$33.00	\$43.00	\$0.00	\$0.00	\$43.00	
4128	00049280	07/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4129	00049281	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4130	00049282	07/03/2017	\$10.00	\$8.00	\$18.00	\$0.00	\$0.00	\$18.00	
4131	00049283	07/03/2017	\$35.00	\$6.80	\$41.80	\$0.00	\$0.00	\$41.80	
4132	00049284	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4133	00049285	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4134	00049286	07/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4135	00049287	07/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4136	00049288	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4137	00049289	07/03/2017	\$35.00	\$1.00	\$36.00	\$0.00	\$0.00	\$36.00	
4138	00049290	07/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4139	00049291	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4140	00049292	07/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4141	00049293	07/03/2017	\$0.00	\$13.00	\$13.00	\$13.00	\$0.00	\$0.00	
4142	00049294	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4143	00049295	07/03/2017	\$10.00	\$6.00	\$16.00	\$0.00	\$0.00	\$16.00	
4144	00049296	07/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4145	00049297	07/03/2017	\$10.00	\$15.00	\$25.00	\$0.00	\$0.00	\$25.00	
4146	00049298	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4147	00049299	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4148	00049300	07/03/2017	\$10.00	\$30.00	\$40.00	\$0.00	\$0.00	\$40.00	
4149	00049301	07/03/2017	\$15.00	\$12.00	\$27.00	\$0.00	\$0.00	\$27.00	
4150	00049302	07/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4151	00049303	07/03/2017	\$40.00	\$15.00	\$55.00	\$0.00	\$0.00	\$55.00	
4152	00049304	07/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4153	00049305	07/03/2017	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$10.00	
4154	00049306	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4155	00049307	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4156	00049308	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4157	00049309	07/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
4158	00049310	07/03/2017	\$15.00	\$12.00	\$27.00	\$0.00	\$0.00	\$27.00	
4159	00049311	07/03/2017	\$10.00	\$17.00	\$27.00	\$0.00	\$0.00	\$27.00	
4160	00049312	07/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	

MENG -RUTNIN EYE SPECIALIS

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From: 12-01-2017 To: 12-01-2018



No	Invoice No	Invoice Date	Service Fee		Total	Discount	Deposit	Sub Total	
			Consult Fee	Medicine Fee					
4161	00049313	07/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4162	00049314	07/03/2017	\$10.00	\$1.50	\$11.50	\$0.00	\$0.00	\$11.50	
4163	00049315	07/03/2017	\$35.00	\$11.00	\$46.00	\$0.00	\$0.00	\$46.00	
4164	00049316	07/03/2017	\$0.00	\$3.00	\$3.00	\$0.00	\$0.00	\$3.00	
4165	00049317	07/03/2017	\$0.00	\$65.00	\$65.00	\$0.00	\$0.00	\$65.00	
4166	00049318	08/03/2017	\$10.00	\$4.00	\$14.00	\$0.00	\$0.00	\$14.00	
4167	00049319	08/03/2017	\$10.00	\$3.00	\$13.00	\$0.00	\$0.00	\$13.00	
4168	00049320	08/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4169	00049321	08/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4170	00049322	08/03/2017	\$10.00	\$10.00	\$20.00	\$0.00	\$0.00	\$20.00	
4171	00049323	08/03/2017	\$10.00	\$11.00	\$21.00	\$0.00	\$0.00	\$21.00	
4172	00049324	08/03/2017	\$10.00	\$5.00	\$15.00	\$0.00	\$0.00	\$15.00	
4173	00049325	08/03/2017	\$0.00	\$5.00	\$5.00	\$5.00	\$0.00	\$0.00	
4174	00049326	08/03/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
4175	00049327	08/03/2017	\$10.00	\$7.00	\$17.00	\$0.00	\$0.00	\$17.00	
4176	00049328	28/12/2017	\$10.00	\$9.00	\$19.00	\$0.00	\$0.00	\$19.00	
			\$54,124.00	\$44,340.45	\$98,464.45	\$3,351.40	\$0.00	\$95,113.05	