BALANCE STATEMENT

PATIENT NAME: JACKY MWIKALI MWANGANGI

PATIENT NUMBER: 516/15

PATIENT TYPE: Cash - cash

STATEMENT DATE: 2016-08-24

MOLARS DENTAL 3rd FIr Electricity House Harambee Avenue City Centre

Tel: 020 242 8104 Mobile: 0751 856 900

Email: creditcontrol@molars.co.ke

DATE	TRANSACTION	INSURANCE	INSURANCE	CASH DEBIT	CASH CREDIT	POINTS	POINTS
	DESCRIPTION	DEBIT	CREDIT			DEBIT	CREDIT
2015-02-02	Consultation Done			1,000.00			
2015-02-02	Consultation Not Started			1,000.00			
2015-02-02	Digital OPG X ray Done			1,000.00			
2015-02-02	Digital OPG X ray Done			1,000.00			
2015-02-02	Lower Fixed Ortho Not Started			40,000.00			
2015-02-02	Lower Fixed Ortho Not Started			40,000.00			
2015-02-02	Loyalty Points						0.46
2015-02-02	Study Models Not Started			1,000.00			
2015-02-02	Study Models Not Started			1,000.00			
2015-02-02	Upper Fixed Ortho Not Started			40,000.00			
2015-02-02	Upper Fixed Ortho Not Started			40,000.00			
2015-02-02	Payment: Cash R8425-02/15				2,000.00		
TOTALS		0.00	0.00	166,000.00	2,000.00	0.00	0.46
BALANCE		0		164,000.00		-0.46	