

BALANCE STATEMENT

PATIENT NAME: Meinrad Mungo Nyang Pollo

PATIENT NUMBER: 1377/13

Centre

PATIENT TYPE: Cash - cash

STATEMENT DATE: 2016-08-24

[creditcontrol@molars.co.ke](mailto:creditcontrol@molars.co.ke)

MOLARS DENTAL

3rd Flr Electricity House

Harambee Avenue City

Tel: 020 242 8104

Mobile: 0751 856

Email:

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2013-05-18	Digital OPG X ray, Done			2,000.00			
2013-05-18	Consultation Done			1,000.00			
2013-05-18	Pulpectomy 84 Partially Done			4,000.00			
2013-05-18	Payment: VISA R29997-05/13				7,000.00		
2013-12-17	Extraction(Pedeatric) Done			2,000.00			
2013-12-17	STA Done			2,000.00			
2013-12-17	Payment: VISA R43659-12/13				3,000.00		
TOTALS		0.00	0.00	11,000.00	10,000.00	0.00	0.00
BALANCE		0		1,000.00		0	