BALANCE STATEMENT

PATIENT NAME: PATRICK MAINA WAMBULU

PATIENT NUMBER: 3448/15

PATIENT TYPE: Cash - cash

STATEMENT DATE: 2016-08-24

MOLARS DENTAL 3rd Flr 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
2015-06-05	Consultation Done			1,000.00			
2015-06-05	Digital OPG X ray Done			3,000.00			
2015-06-05	Extraction(Roots) 25, 26, 27, 28 Not Started			6,000.00			
2015-06-05	Extraction(Roots) 37 Not Started			2,000.00			
2015-06-05	Extraction(Roots) 48, 46 Not Started			4,000.00			
2015-06-05	Gum treatment Not Started			5,000.00			
2015-06-05	Loyalty Points						0.66
2015-06-05	Root Canal Treatment 36 Not Started			9,000.00			
2015-06-05	Payment: Cash R12079-06/15				3,000.00		
TOTALS		0.00	0.00	30,000.00	3,000.00	0.00	0.66
BALANCE		0		27,000.00		-0.66	·