

BALANCE STATEMENT

PATIENT NAME: ISAIAH KABUGI GITHINJI

MOLARS DENTAL  
3rd Flr Electricity  
Harambee  
Tel:

PATIENT NUMBER: 2506/16

House  
Avenue City Centre  
PATIENT TYPE: UAP - FAULU KENYA  
020 242 8104

STATION 0751856920  
MOBILE 0751856920  
16-08-24

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

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2016-04-02	Co-payment for invoice I42673-04/16		200.00	200.00			
2016-04-02	Consultation Done - I42673-04/16	1,000.00					
2016-04-02	Digital OPG X ray Done - I42673-04/16	2,000.00					
2016-04-02	Gum treatment Done - I42673-04/16	5,000.00					
2016-04-02	Implant 15,16,25 Not Started			210,000.00			
2016-04-02	Loyalty Points						1.08
2016-06-07	Payment: EFT RI17005-06/16		7,800.00				
TOTALS		8,000.00	8,000.00	210,200.00	0.00	0.00	1.08
BALANCE		0		210,200.00		-1.08	