

BALANCE STATEMENT

PATIENT NAME: Patrick Gikundi Murithi

PATIENT NUMBER: 402/13

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 DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2013-02-08	Digital OPG X ray, Done			2,000.00			
2013-02-08	Amalgam Fillings 47,48 Not Started			5,000.00			
2013-02-08	Consultation , Partially Done			1,000.00			
2013-02-08	Extraction(Adult) 36 Partially Done			2,000.00			
2013-02-08	Full Mouth Scaling , Partially Done			4,000.00			
2013-02-08	Root Canal Treatment 37,46 Partially Done			12,000.00			
2013-02-08	Payment: Cash R25168-02/13				6,000.00		
2013-02-20	Payment: Mpesa R25369-02/13				7,500.00		
2013-03-15	Payment: Cash R26149-03/13				5,500.00		
2013-03-28	Payment: Cash R26661-03/13				1,000.00		
TOTALS		0.00	0.00	26,000.00	20,000.00	0.00	0.00
BALANCE		0		6,000.00		0	