

BALANCE STATEMENT

PATIENT NAME: ALEX MUTUKU

PATIENT NUMBER: 4085/16

PATIENT TYPE: APA insurance - COUNTY GOVERMENT of MAKUENI

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
2016-06-14	Amalgam Fillings 24,35 Done - I44626-06/16	8,000.00					
2016-06-14	Composite Fillings 11,21 Done - I44626-06/16	8,000.00					
2016-06-14	Consultation Done - I44626-06/16	1,000.00					
2016-06-14	Crown Done			20,000.00			
2016-06-14	Digital OPG X ray Done - I44626-06/16	2,000.00					
2016-06-14	Gum treatment Partially Done - I44626-06/16	1,000.00					
2016-06-14	Loyalty Points						0.68
2016-06-14	Loyalty Points						5.30
2016-06-15	Loyalty Points						9.45
2016-06-15	interspace soft blister toothbrush FAITH Done			2,500.00			
2016-06-15	Payment: Cash R23392-06/16				20,000.00		
2016-06-15	Payment: Mpesa R23418-06/16				2,000.00		
TOTALS		20,000.00	0.00	22,500.00	22,000.00	0.00	15.43
BALANCE		20,000.00		500.00		-15.43	