

## BALANCE STATEMENT

PATIENT NAME: FAITH GATWIRI MUTWIRI

PATIENT NUMBER: 983/14

PATIENT TYPE: APA insurance - Coffee Development Fund

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

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2014-03-18	Consultation Done - I25134-03/14	1,000.00					
2014-03-18	Digital OPG X ray Done - I25134-03/14	2,000.00					
2014-03-18	Loyalty Points						0.75
2014-03-18	Root Canal Treatment 46 Done - I25134-03/14	8,000.00					
2014-03-25	Loyalty Points						0.55
2014-04-01	Loyalty Points						0.70
2014-06-13	Payment: Cheque RI1601-06/14		11,000.00				
2014-08-05	Loyalty Points						0.78
2014-08-08	Amalgam Fillings 15, 14 Not Started - I28076-08/14	6,000.00					
2014-08-08	Crown 46 Not Started			15,000.00			
2014-08-08	Digital OPG X ray Not Started - I28076-08/14	1,500.00		500.00			
2014-11-18	Payment: Cheque RI4064-11/14		7,500.00				
TOTALS		18,500.00	18,500.00	15,500.00	0.00	0.00	2.78
BALANCE		0		15,500.00		-2.78	