## **BALANCE STATEMENT**

**MOLARS** 

PATIENT NAME: PATRICK OLUM DENTAL

PATIENT AND MBERCIET PROUSE

Harambee Avenue City Centre
PATIENT TYPE: APA insurance - FAULU KENYA
Tel: 020 242 8104

Mobile: 0751 856 900 STATEMENT DATE: 2016-08-24

Email: creditcontrol@molars co ke

		Email: <a href="mailto:creditcontrol@molars.co.ke">creditcontrol@molars.co.ke</a>						
DATE	TRANSACTION	INSURANCE	INSURANCE	CASH DEBIT	CASH CREDIT	POINTS		
POINTS	DESCRIPTION	DEBIT	CREDIT			DEBIT		
2014-06-30	Consultation Done - I27393-06/14	1,000.00						
2014-06-30	Digital OPG X ray Done - I27393-06/14	2,000.00						
2014-06-30	Loyalty Points						1.78	
2014-06-30	Root Canal Treatment 34 Partially  Done - I27393-06/14	9,000.00						
2014-06-30	Payment: Cash R3202-06/14				200.00			
2014-07-16	Loyalty Points						0.73	
2014-09-11	Payment: Cheque RI3321-09/14		11,800.00					
2014-12-09	Loyalty Points						0.74	
2014-12-16	Loyalty Points						1.38	
2014-12-16	Root Canal Treatment 17,16 Done - I31012-12/14	16,000.00						
2014-12-17	Payment: Cash R7263-12/14				200.00			
2015-01-31	Amalgam Fillings 46 Not Started - I32090-01/15	Un-authorised						
2015-01-31	Co-payment for invoice I27393-06/14		200.00	200.00				
2015-01-31	Consultation Not Started - I32090-01/15	Un-authorised						
2015-01-31	Loyalty Points						4.77	
2015-02-06	Loyalty Points						2.13	
2015-02-14	Payment: Cheque RI5101-02/15		15,800.00					
TOTALS		28,000.00	27,800.00	200.00	400.00	0.00	11.53	