

BALANCE STATEMENT

PATIENT NAME: PHILLIP SAMBU

PATIENT NUMBER: 3508/16

PATIENT TYPE: Gateway Insurance - THE BOMA HOTEL

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 |
|------------|--|--------------------|---------------------|------------|-------------|-----------------|------------------|
| 2016-06-27 | Co-payment for invoice I44986-06/16 | | 100.00 | 100.00 | | | |
| 2016-06-27 | Digital OPG X ray Done - I44986-06/16 | 2,000.00 | | | | | |
| 2016-06-27 | Loyalty Points | | | | | | 1.20 |
| 2016-06-27 | Root Canal Treatment 12 Partially Done - I44986-06/16 | 9,000.00 | | | | | |
| 2016-06-27 | Root Canal Treatment 22 Partially Done - I44986-06/16 | 4,000.00 | | | | | |
| TOTALS | | 15,000.00 | 100.00 | 100.00 | 0.00 | 0.00 | 1.20 |
| BALANCE | | 14,900.00 | | 100.00 | | -1.20 | |