

BALANCE STATEMENT

PATIENT NAME: CHRISTINE NZISA KIOKO

PATIENT NUMBER: 4028/15

PATIENT TYPE: BRITAM GENERAL INSURANCE COMPANY - Equimed

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
2015-07-10	Consultation Done - I35708-07/15	1,000.00					
2015-07-10	Crown 22,24 Not Started			30,000.00			
2015-07-10	Loyalty Points						0.28
2015-07-10	Loyalty Points						0.58
2015-07-10	Root Canal Treatment 24 Partially Done			2,500.00			
2015-07-10	Root Canal Treatment 24 Partially Done - I35708-07/15	6,500.00					
2015-07-22	Loyalty Points						2.15
2015-07-22	Root Canal Treatment 24 Not Started			1,500.00			
2015-07-22	Root Canal Treatment 24 Partially Done			1,000.00			
2015-07-22	Payment: Cash R13573-07/15				1,000.00		
2015-08-12	Loyalty Points						1.45
2015-08-12	Payment: Cash R14205-08/15				1,500.00		
2016-02-17	Payment: EFT RI14441-02/16		7,500.00				
TOTALS		7,500.00	7,500.00	35,000.00	2,500.00	0.00	4.46
BALANCE		0		32,500.00		-4.46	