

BALANCE STATEMENT

PATIENT NAME: Miriam Jerotich Kiplagat

PATIENT NUMBER: 298/13

PATIENT TYPE: Cash - cash

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
2013-01-28	Digital OPG X ray, Done			2,000.00			
2013-01-28	Composite Fillings 12 Done			2,500.00			
2013-01-28	Consultation Not Started			1,000.00			
2013-01-28	Payment: Cash R24790-01/13				3,500.00		
TOTALS		0.00	0.00	5,500.00	3,500.00	0.00	0.00
BALANCE		0		2,000.00		0	