

BALANCE STATEMENT

PATIENT NAME: FESTO AKONDE IMBO

PATIENT NUMBER: 89/16

PATIENT TYPE: Jubilee Ins. Co. - DIRECT SALES

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
2016-01-06	Consultation Partially Done - I40442-01/16	1,000.00					
2016-01-06	Dentofit tooth paste Done			1,500.00			
2016-01-06	Digital OPG X ray Done - I40442-01/16	1,500.00					
2016-01-06	Extraction(Roots) 15 Done			500.00			
2016-01-06	Extraction(Roots) 15 Done - I40442-01/16	2,000.00					
2016-01-06	Loyalty Points						0.37
2016-01-06	Loyalty Points						0.59
2016-01-06	Payment: Cash R18815-01/16				1,500.00		
2016-03-09	Payment: Cheque R115031-03/16		4,500.00				
TOTALS		4,500.00	4,500.00	2,000.00	1,500.00	0.00	0.96
BALANCE		0		500.00		-0.96	