

BALANCE STATEMENT

PATIENT NAME: Peter Mwangi Chegeh

PATIENT NUMBER: 2439/12

PATIENT TYPE: AON Minet - NAIROBI BOTTLERS (NBL)

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
2012-11-02	Digital OPG X ray, Done - I16116-11/12	2,000.00					
2012-11-02	Consultation , Not Started - I16116-11/12	1,000.00					
2012-11-02	Root Canal Treatment 15 Partially Done - I16116-11/12	8,000.00					
2012-11-02	Payment: Cash R21810-11/12				200.00		
2012-11-23	A , Partially Done - I16806-11/12	5,000.00					
2012-11-23	Co-payment for invoice I16116-11/12		200.00	200.00			
2013-03-05	Payment: Cheque R25736-03/13		1,000.00				
2013-03-05	Payment: Cheque R25736-03/13		2,000.00				
2013-03-05	Payment: Cheque R25736-03/13		8,000.00				
2013-06-20	Payment: Cheque R32203-06/13		4,800.00				
TOTALS		16,000.00	16,000.00	200.00	200.00	0.00	0.00
BALANCE		0		0		0	