BALANCE STATEMENT

PATIENT NAME: FELISTA AKINYI ODUOR

PATIENT NUMBER: 3342/16

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	INSURANCE	INSURANCE	CASH DEBIT	CASH CREDIT	POINTS	POINTS
	DESCRIPTION	DEBIT	CREDIT			DEBIT	CREDIT
2016-05-12	Amalgam Fillings 47 47o Not Started			3,500.00			
2016-05-12	Bleaching Not Started			25,000.00			
2016-05-12	Consultation Partially Done			1,000.00			
2016-05-12	Digital OPG X ray Done			1,500.00			
2016-05-12	Gum treatment Not Started			5,000.00			
2016-05-12	Implant 36 Not Started			45,000.00			
2016-05-12	Implant 46 Not Started			45,000.00			
2016-05-12	Loyalty Points						1.13
2016-05-12	Payment: Cash R22451-05/16				1,000.00		
2016-05-12	Payment: Mpesa R22452-05/16				1,000.00		
TOTALS		0.00	0.00	126,000.00	2,000.00	0.00	1.13
BALANCE	.	0		124,000.00		-1.13	