

BALANCE STATEMENT

PATIENT NAME: PATRICIA WANJIRU KAGIRI

PATIENT NUMBER: 9924/15

PATIENT TYPE: APA insurance - Ole Dume Suites Limited

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
2016-07-14	Consultation Done - I45459-07/16	1,000.00					
2016-07-14	Digital OPG X ray Done - I45459-07/16	1,500.00					
2016-07-14	Loyalty Points						1.24
2016-07-15	Amalgam Fillings 17 Not Started			4,000.00			
2016-07-15	Amalgam Fillings 27 Not Started			4,000.00			
2016-07-15	Extraction(Adult) 28 Not Started			3,000.00			
2016-07-15	Loyalty Points						1.18
2016-07-15	Root Canal Treatment 14 Partially Done - I45483-07/16	7,500.00					
2016-07-15	Root Canal Treatment 14 balance Done			500.00			
2016-07-22	Loyalty Points						1.58
2016-07-29	Loyalty Points						0.19
2016-08-12	Loyalty Points						3.20
TOTALS		10,000.00	0.00	11,500.00	0.00	0.00	7.39
BALANCE		10,000.00		11,500.00		-7.39	