BALANCE STATEMENT

PATIENT NAME: LILIAN WAIRIMU GATHURU

PATIENT NUMBER: 5296/14

PATIENT TYPE: Madison Insurance - KBC

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
2014-12-08	Composite Fillings 11,21 Done -	8,000.00					
2014-12-08	Composite Fillings 24 Done -	4,000.00					
2014-12-08	Consultation Done - I30828-12/14	1,000.00					
2014-12-08	Digital OPG X ray Done -	2,000.00					
2014-12-08	Loyalty Points						1.07
2014-12-09	Loyalty Points						1.21
2015-02-18	Payment: Cheque RI5470-02/15		11,000.00				
2015-08-25	Payment: Cheque RI9686-08/15		4,000.00				
2015-12-22	Amalgam Fillings 35 distal Done - I39983-12/15	3,000.00					
2015-12-22	Consultation Done - I39983-12/15	1,000.00					
2015-12-22	Loyalty Points						1.17
2016-02-15	Composite Fillings 26 Partially Done - I41518-02/16	4,000.00					
2016-02-15	Consultation Done			1,000.00			
2016-02-15	Loyalty Points						1.97
2016-02-16	Payment: Cheque RI14367-02/16		4,000.00				
2016-04-26	Payment: Cheque RI15903-04/16		4,000.00				
TOTALS		23,000.00	23,000.00	1,000.00	0.00	0.00	5.42
BALANCE		0		1,000.00		-5.42	