

BALANCE STATEMENT

PATIENT NAME: Carol Gakii Muriira

PATIENT NUMBER: 73/09

PATIENT TYPE: UAP - EABL-

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
2010-01-19	Consultation Done			500.00			
2010-01-23	16 pfm crowns Partially Done			144,000.00			
2010-01-23	opg Done			1,000.00			
2010-01-23	Payment: Cheque R2164-01/10				37,500.00		
2010-01-23	Payment: Cheque R2165-01/10				36,000.00		
2010-02-27	Payment: Cash R2805-02/10				35,000.00		
2010-03-01	Payment: Cash R2576-03/10				36,000.00		
2015-02-04	Bleaching Not Started			0.00			
2015-02-04	Loyalty Points						1.45
TOTALS		0.00	0.00	145,500.00	144,500.00	0.00	1.45
BALANCE		0		1,000.00		-1.45	