

BALANCE STATEMENT

PATIENT NAME: JAMES NGIGI KAMAU

PATIENT NUMBER: 5669/14

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 DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2014-12-31	Consultation Done			1,000.00			
2014-12-31	Digital OPG X ray Done			2,000.00			
2014-12-31	Gum treatment Partially Done			5,000.00			
2014-12-31	Loyalty Points						1.00
2014-12-31	Root Canal Treatment 45 Partially Done			8,000.00			
2014-12-31	Payment: VISA R7599-12/14				15,000.00		
2015-01-06	Loyalty Points						0.36
2015-01-13	Loyalty Points						0.85
TOTALS		0.00	0.00	16,000.00	15,000.00	0.00	2.21
BALANCE		0		1,000.00		-2.21	