

BALANCE STATEMENT

PATIENT NAME: LUCIA MUSENYA WAMBUA

PATIENT NUMBER: 4014/15

PATIENT TYPE: APA insurance - KENYA WATER AND SANITATION NETWORK

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
2015-07-09	Amalgam Fillings 47 Not Started			3,000.00			
2015-07-09	Composite Fillings 41,31 Done - I35683-07/15	8,000.00					
2015-07-09	Consultation Done - I35683-07/15	1,000.00					
2015-07-09	Digital OPG X ray Done - I35683-07/15	1,500.00					
2015-07-09	Loyalty Points						1.43
2015-07-09	PRESCRIPTION: P14293-07/15 Dentofit			1,000.00			
2015-07-09	PRESCRIPTION: P14294-07/15 Dentofit			1,000.00			
2015-07-09	5th Date FAITH			2,000.00			
2015-07-09	Payment: Cash R13167-07/15				2,000.00		
2015-07-09	Payment: Cash R13168-07/15				1,000.00		
2015-09-25	Payment: Cheque RI10498-09/15		10,500.00				
TOTALS		10,500.00	10,500.00	7,000.00	3,000.00	0.00	1.43
BALANCE		0		4,000.00		-1.43	