## **BALANCE STATEMENT**

PATIENT NAME: FESTUS NDUNDA MULE

PATIENT NUMBER: 3409/15

PATIENT TYPE: Jubilee Ins. Co. - NAIROBI BOTTLERS (NBL)

STATEMENT DATE: 2016-08-24

MOLARS DENTAL 3rd Flr Electricity House Harambee Avenue City Centre

Tel: 020 242 8104 Mobile: 0751 856 900

Email: <a href="mailto:creditcontrol@molars.co.ke">creditcontrol@molars.co.ke</a>

DATE	TRANSACTION	INSURANCE	INSURANCE	CASH DEBIT	CASH CREDIT POINTS		POINTS
	DESCRIPTION	DEBIT	CREDIT			DEBIT	CREDIT
2015-06-02	Consultation Done - I34718-06/15	1,000.00					
2015-06-02	Digital OPG X ray Done			500.00			
2015-06-02	Digital OPG X ray Done - I34718-06/15	1,000.00					
2015-06-02	Loyalty Points						1.81
2015-06-02	Root Canal Treatment 15, 44 Not Started - I34718-06/15	18,000.00					
2015-07-31	Payment: EFT RI9040-07/15		20,000.00				
2015-10-28	Loyalty Points						1.66
2015-11-12	Loyalty Points						1.30
2015-11-18	Loyalty Points						0.64
TOTALS	•	20,000.00	20,000.00	500.00	0.00	0.00	5.41
BALANCE	≣	0		500.00		-5.41	·