BALANCE STATEMENT

PATIENT NAME: REGINA KARIMI MUCHIRI

PATIENT NUMBER: 2855/14

PATIENT TYPE: BRITAM GENERAL INSURANCE COMPANY - MAVUNO CHURCH

STATEMENT DATE: 2016-08-24

MOLARS DENTAL 3rd FIr Electricity House Harambee Avenue City Centre

Tel: 020 242 8104 Mobile: 0751 856 900

 ${\bf Email:}\ \underline{creditcontrol@molars.co.ke}$

DATE	TRANSACTION	INSURANCE	INSURANCE	CASH DEBIT	CASH CREDIT	POINTS	POINTS
	DESCRIPTION	DEBIT	CREDIT			DEBIT	CREDIT
2014-07-04	Co-payment for invoice I27481-07/14		500.00	500.00			
2014-07-04	Consultation Done - I27481-07/14	1,000.00					
2014-07-04	Digital OPG X ray Done - I27481-07/14	2,000.00					
2014-07-04	Loyalty Points						1.63
2015-01-07	Payment: EFT RI4819-01/15		2,500.00				
TOTALS		3,000.00	3,000.00	500.00	0.00	0.00	1.63
BALANCE		0		500.00		-1.63	