

**BALANCE STATEMENT**

PATIENT NAME: Samuel Gichuru Iregi

PATIENT NUMBER: 2662/12

PATIENT TYPE: AON Minet - 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: [creditcontrol@molars.co.ke](mailto:creditcontrol@molars.co.ke)

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2012-11-24	Digital OPG X ray, Done - I16822-11/12	2,000.00					
2012-11-24	Digital OPG X ray, Done - I16824-11/12	2,000.00					
2012-11-24	A , Partially Done - I16823-11/12	6,000.00					
2012-11-24	A , Partially Done - I16824-11/12	6,000.00					
2012-11-24	Amalgam Fillings 35,36 Partially Done - I16822-11/12	5,000.00					
2012-11-24	Amalgam Fillings 35,36,46 Partially Done - I16824-11/12	7,500.00					
2012-11-24	Co-payment for invoice I16822-11/12		200.00	200.00			
2012-11-24	Consultation , Not Started - I16822-11/12	1,000.00					
2012-11-24	Consultation , Not Started - I16824-11/12	1,000.00					
2012-11-24	Payment: Cash R22376-11/12				200.00		
2013-03-05	Payment: Cheque R25736-03/13		1,000.00				
2013-03-05	Payment: Cheque R25736-03/13		2,000.00				
2013-03-05	Payment: Cheque R25736-03/13		6,000.00				
2013-03-05	Payment: Cheque R25736-03/13		7,500.00				
TOTALS		30,500.00	16,700.00	200.00	200.00	0.00	0.00
BALANCE		13,800.00		0		0	