

BALANCE STATEMENT

PATIENT NAME: CAROLYNE CEJJAY JELIMO

PATIENT NUMBER: 3295/14

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
2014-08-07	Amalgam Fillings 27 Partially Done			3,000.00			
2014-08-07	Consultation Done			1,000.00			
2014-08-07	Digital OPG X ray Done			2,000.00			
2014-08-07	Loyalty Points						8.37
2014-08-07	Root Canal Treatment 37 Partially Done			9,000.00			
2014-08-07	Payment: Cash R4133-08/14				11,000.00		
2014-08-14	Loyalty Points						1.17
2014-08-21	Loyalty Points						8.55
2014-09-02	Loyalty Points						2.58
2014-09-02	Payment: Cash R4793-09/14				3,000.00		
TOTALS		0.00	0.00	15,000.00	14,000.00	0.00	20.67
BALANCE		0		1,000.00		-20.67	