

BALANCE STATEMENT

PATIENT NAME: AGNES MUNYIVA KAVILA

PATIENT NUMBER: 170/13

PATIENT TYPE: Resolution Health - Access Kenya

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
2013-01-16	Digital OPG X ray, Done - I17749-01/13	1,000.00					
2013-01-16	Amalgam Fillings 24 Partially Done - I17750-01/13	0.00		1,000.00			
2013-01-16	Consultation , Partially Done - I17749-01/13	1,000.00					
2013-01-16	Full Mouth Scaling , Partially Done - I17852-01/13	5,000.00					
2013-01-16	Root Canal Treatment 25 Partially Done - I17749-01/13	8,000.00					
2013-04-05	Payment: Cheque R26855-04/13		5,000.00				
2013-05-11	Payment: Cheque R28856-05/13		1,000.00				
2013-05-11	Payment: Cheque R28856-05/13		1,000.00				
2013-05-11	Payment: Cheque R28856-05/13		8,000.00				
TOTALS		15,000.00	15,000.00	1,000.00	0.00	0.00	0.00
BALANCE		0		1,000.00		0	