

BALANCE STATEMENT

PATIENT NAME: MOSES KIOKO WAMBUA

PATIENT NUMBER: 940/15

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](mailto:creditcontrol@molars.co.ke)

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2015-03-02	Biopsy Not Started			12,000.00			
2015-03-02	Consultation Done			1,000.00			
2015-03-02	Digital OPG X ray Done			2,000.00			
2015-03-02	Gum treatment Done			5,000.00			
2015-03-02	Loyalty Points						2.01
2015-03-02	Root Canal Treatment 17 Not Started			8,000.00			
2015-03-02	Payment: Cash R9224-03/15				5,000.00		
2015-03-10	Loyalty Points						0.45
2015-03-10	Payment: Cash R9451-03/15				3,000.00		
2015-05-14	Loyalty Points						1.78
2015-05-14	PRESCRIPTION: P14061-05/15 Dentofit			1,000.00			
2015-05-14	PRESCRIPTION: P14062-05/15 Dentofit			1,000.00			
2015-05-14	Payment: Cash R11405-05/15				1,000.00		
TOTALS		0.00	0.00	30,000.00	9,000.00	0.00	4.24
BALANCE		0		21,000.00		-4.24	