

BALANCE STATEMENT

PATIENT NAME: RUTH AKINYI OMOLLO

PATIENT NUMBER: 11170/15

PATIENT TYPE: Resolution Health - SOS Childrens Village 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
2015-12-21	Loyalty Points						0.47
2015-12-21	Loyalty Points						1.63
2015-12-22	Consultation Not Started - I39926-12/15	1,000.00					
2015-12-22	Digital OPG X ray Not Started - I39926-12/15	1,500.00					
2015-12-22	Gum treatment Not Started - I39926-12/15	4,500.00		500.00			
2016-05-06	Payment: EFT RI16206-05/16		7,000.00				
TOTALS		7,000.00	7,000.00	500.00	0.00	0.00	2.10
BALANCE		0		500.00		-2.10	