

BALANCE STATEMENT

PATIENT NAME: Charity Wangui Kimani

PATIENT NUMBER: 2148/13

PATIENT TYPE: C.I.C - NAIROBI BOTTLERS (NBL)

STATEMENT DATE: 2016-08-24

Electricty House

Harambee Avenue City Centre

Tel: 020 242 8104

Mobile: 0751 856 900

Email: creditcontrol@molars.co.ke

MOLARS DENTAL

3rd Flr

DATE	TRANSACTION	INSURANCE	INSURANCE	CASH DEBIT	CASH CREDIT	POINTS	
POINTS	DESCRIPTION	DEBIT	CREDIT			DEBIT	
2013-07-15	Digital OPG X ray, Done - I20510-07/13	2,000.00					
2013-07-15	Consultation Not Started - I20510-07/13	1,000.00					
2013-07-15	Root Canal Treatment 27 Not Started - I20510-07/13	8,000.00					
2013-09-26	Payment: Cheque R38348-09/13		1,000.00				
2013-09-26	Payment: Cheque R38348-09/13		2,000.00				
2013-09-26	Payment: Cheque R38348-09/13		8,000.00				
2014-12-29	Amalgam Fillings 24 Partially Done - I31304-12/14	4,000.00					
2014-12-29	Co-payment for invoice I31304-12/14		200.00	200.00			
2014-12-29	Consultation Partially Done - I31304-12/14	1,000.00					
2014-12-29	Gum treatment Partially Done - I31304-12/14	5,000.00					
2015-03-04	Payment: EFT RI5596-03/15		9,800.00				
TOTALS		21,000.00	21,000.00	200.00	0.00	0.00	0.00
BALANCE		0		200.00		0	