

BALANCE STATEMENT

PATIENT NAME: HALIMA JAMA

PATIENT NUMBER: 1087/15

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

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2015-03-11	Consultation Done			1,000.00			
2015-03-11	Digital OPG X ray Done			2,000.00			
2015-03-11	Extraction(Adult) 18,11 Not Started			4,000.00			
2015-03-11	Extraction(Adult) 21,28 Not Started			4,000.00			
2015-03-11	Extraction(Adult) 31,38 Not Started			4,000.00			
2015-03-11	Extraction(Adult) 48,41 Done			4,000.00			
2015-03-11	Loyalty Points						2.00
2015-03-11	Payment: Cash R9477-03/15				6,000.00		
TOTALS		0.00	0.00	19,000.00	6,000.00	0.00	2.00
BALANCE		0		13,000.00		-2.00	