

BALANCE STATEMENT

PATIENT NAME: SHARON WANJIKU NGANGA

PATIENT NUMBER: 3654/15

PATIENT TYPE: AAR - NATION STAFF CONSUMER SOCIETY

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
2015-06-18	Co-payment for invoice I35103-06/15		200.00	200.00			
2015-06-18	Consultation Not Started - I35103-06/15	1,000.00					
2015-06-18	Digital OPG X ray Not Started - I35103-06/15	2,000.00					
2015-06-18	Loyalty Points						0.46
2015-06-18	Loyalty Points						0.70
TOTALS		3,000.00	200.00	200.00	0.00	0.00	1.16
BALANCE		2,800.00		200.00		-1.16	