

BALANCE STATEMENT

PATIENT NAME: Hycinth Monchari Onyango

PATIENT NUMBER: 4054/13

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
2013-12-10	Digital OPG X ray, Done			2,000.00			
2013-12-10	Consultation Partially Done			1,000.00			
2013-12-10	Full Mouth Scaling Partially Done			5,000.00			
2013-12-10	Root Canal Treatment 36 Partially Done			8,000.00			
2013-12-10	Root Curratage Done			2,000.00			
2013-12-10	Payment: Cash R43356-12/13				6,000.00		
2013-12-17	Payment: Cash R43658-12/13				4,000.00		
2014-01-06	Payment: Cash R45007-01/14				7,000.00		
TOTALS		0.00	0.00	18,000.00	17,000.00	0.00	0.00
BALANCE		0		1,000.00		0	