

BALANCE STATEMENT

PATIENT NAME: Shcolastica Kaaria

PATIENT NUMBER: 194/13

PATIENT TYPE: Dr. Wambugu

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
2013-01-18	Digital OPG X ray, Done			2,000.00			
2013-01-18	Composite Fillings 16,14,27,25,36,46,47 Done			14,000.00			
2013-01-18	Consultation Done			1,000.00			
2013-01-18	prodent Done			500.00			
2013-01-18	Payment: Cash R24539-01/13				15,000.00		
2013-01-18	Payment: Mpesa R24540-01/13				2,500.00		
2014-06-09	Consultation Done			1,000.00			
2014-06-09	Digital OPG X ray Done			2,000.00			
2014-06-09	Loyalty Points						1.62
2014-06-09	Root Canal Treatment 13 Done			8,000.00			
2014-06-09	Payment: Cash R2614-06/14				10,000.00		
2014-06-16	Loyalty Points						0.38
2014-06-23	Loyalty Points						0.48
TOTALS		0.00	0.00	28,500.00	27,500.00	0.00	2.48
BALANCE		0		1,000.00		-2.48	