

BALANCE STATEMENT

PATIENT NAME: WELLINGTON OTIENO ONYANGO

MOLARS DENTAL
3rd Flr Electricity
Harambee
Tel:

PATIENT NUMBER: 4482/15
House
Avenue City Centre
PATIENT TYPE: AAR - INDRA LIMITED
020 242 8104
STATIONARY DATE 2016-08-24
Mobile 075 1856 920
Email: creditcontrol@molars.co.ke

DATE	TRANSACTION DESCRIPTION	INSURANCE DEBIT	INSURANCE CREDIT	CASH DEBIT	CASH CREDIT	POINTS DEBIT	POINTS CREDIT
2015-07-28	Consultation Done - I36129-07/15	1,000.00					
2015-07-28	Digital OPG X ray Done - I36129-07/15	2,000.00					
2015-07-28	Gum treatment Partially Done - I36129-07/15	4,500.00					
2015-07-28	Loyalty Points						2.29
2015-07-28	gum treatment and prophylaxis Partially Done			500.00			
2015-12-23	Payment: EFT RI12778-12/15		7,300.00				
TOTALS		7,500.00	7,300.00	500.00	0.00	0.00	2.29
BALANCE		200.00		500.00		-2.29	