



# Balance Statement

Invoices till 30/07/2024 not paid as on 30/07/2024

## DENTCARE DENTAL LAB PVT. LTD.

**BLR005869 - SAVITHA KORI**

Opening balance IN / CN : 0

Branch	Bill Date	Bill No	Order Type	SO Number	Patient Name	Product & Units	Amount	Settled Amount	Balance Amt	Cumulative Balance
BAN	02/05/2024	TIBAN/46201734	SO	24044975461	KORI SHAILAJA	DENTCARE ACRYLIC LIGHT CURE SPECIAL TRAY PER JAW-12,42	775.00	0.00	775.00	775.00
BAN	07/05/2024	TIBAN/46202030	SO	24055088451	KARI SHAILAJA	DENTCARE ACRYLIC LIGHT CURE DENTURE BASE WITH BITE BLOCK PER JAW-11,41	423.00	0.00	423.00	1,198.00
BAN	18/05/2024	TIBAN/46202761	SO	24055272932	KORI SHAILAJA	DENTCARE ACRYLIC IMPACT UPPER & LOWER CD (TEETH SETTING)-11,41	2,095.00	0.00	2,095.00	3,293.00
KER	25/05/2024	TIKER/45084432	SO	24055272933	KORI SHAILAJA	DENTCARE ACRYLIC IMPACT UPPER & LOWER CD (ACRYLISING)-11,12,13,14,15,16,17,21,22,23,24,25,26,27,41,42,43,45,46,47,31,32,33,35,36,37	3,326.00	0.00	3,326.00	6,619.00
KER	26/06/2024	TIKER/45133217	SO	24065906732	VANI	DENTCARE ZIRCONIA ULTRA PLUS PFZ CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-11,12,21,22,41,42,43,31	25,158.00	0.00	25,158.00	31,777.00
							<b>31,777.00</b>	<b>0.00</b>		<b>31,777.00</b>

After Adjusting Pending Cheques, If Any : **31,777.00**  
 Receipts Pending Reconciliation Or Settlement : **0.00**  
 Net Receivable : **31,777.00**

Trans. Date	Party's Bank	Submitted Bank	Cheque Date	Cheque No	Cheque Amount

**Bank Account Details**  
 Bank Name : ICICI Bank  
 Virtual Account No: **DCJKBLR005869**  
*(the first 7 digits are alphabet)*  
 Branch : ICICI CMS  
 IFSC Code : ICIC0000104

QR Code For UPI Payment\*



\*The Virtual Account Number and QR Code is unique for each customer . Kindly ensure to make payment only to the Virtual Account Number or QR code specified in your respective invoice or Balance statement.