



# Balance Statement

Invoices till 10/10/2024 not paid as on 10/10/2024

## DENTCARE DENTAL LAB PVT. LTD.

### DEL001491 - GOYAL S DENTAL IMPLANT CENTRE

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
KER	27/03/2024	CN/135006701	SO	24032701696	RACHNA	DENTCARE ALIGNERS PRIME 28 SPLINTS PER PACK-	-40,281.00	-39,931.00	-350.00	-350.00
KER	09/10/2024	TIKER/45301577	SO	24107491375	DEEPAK CHAUDHARY	DENTCARE DMLS PFM CROWN/BRIDGE (METAL TRIAL)-15,16,17 , DENTCARE NOVA PFM IMPLANT CROWN/BRIDGE (METAL TRIAL)-15,16,17	6,108.00	0.00	6,108.00	5,758.00
							<b>-34,173.00</b>	<b>-39,931.00</b>		<b>5,758.00</b>

After Adjusting Pending Cheques, If Any : **5,758.00**

Receipts Pending Reconciliation Or Settlement : **49,954.00**

Net Receivable : **-44,196.00**

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

#### Bank Account Details

Bank Name : ICICI Bank  
 Virtual Account No: **DCJKDEL001491**  
*(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.