



Ledger Report

DENTCARE DENTAL LAB PVT. LTD.

From Date : 01/01/2019 To Date : 19/06/2024
DEL003881 - WESTSIDE DENTAL

								*Period Opening Bal.:	0.00
Trans. Date	DocType	Trans. No	DocNo	Remarks	Patient Name / WorkType	Debit	Credit	Balance	
13/04/2022	IN	SA2200016921	1015778		ARNAV KHANNA 14 IPS E.MAX PRESS VENEER LAYERING-21	3,080.00	0.00	3,080.00	
11/06/2022	RC		6032553	Bank Transfer		0.00	3,080.00	0.00	
13/09/2022	IN	SA2200234782	1234400		POOJA BAGRI 125a IMPLANT DENTCARE NOVA CROWN/BRIDGE DIRECT DELIVERY-14	2,258.00	0.00	2,258.00	
07/10/2022	RC		6078323	Bank Transfer		0.00	2,258.00	0.00	
08/03/2024	IN	TI/35366637	31492714		USHA GUPTA L C RESIN IMPLANT SPECIAL BITE PER JAW-11,41 , DENTCARE COCR UCLA ABUTMENT CASTING PER UNIT-11,41	9,444.00	0.00	9,444.00	
14/03/2024	IN	TI/35375520	31501593		USHA GUPTA L C RESIN IMPLANT SPECIAL BITE PER JAW-11	522.00	0.00	9,966.00	
05/04/2024	IN	TIKER/45007946	41007903		USHA GUPTA DENTCARE DMLS HYBRID DENTURE 3-4 IMPLANTS (FRAMEWORK)-41 , DENTCARE DMLS HYBRID DENTURE 5-6 IMPLANTS (FRAMEWORK)-41 , DENTCARE DMLS INJECT PRO HYBRID DENTURE 3-4 IMPLANTS (TEETH SETTING)-41 , DENTCARE DMLS INJECT PRO HYBRID DENTURE 5-6 IMPLANTS (TEETH SETTING)-41	55,468.00	0.00	65,434.00	
15/04/2024	IN	TIKER/45022316	41022189		USHA GUPTA DENTCARE DMLS INJECT PRO HYBRID DENTURE 3-4 IMPLANTS (ACRYLISING)-41,42,43,44,45,46,3 1,32,33,34,35,36 , DENTCARE DMLS INJECT PRO HYBRID DENTURE 5-6 IMPLANTS (ACRYLISING)-41,42,43,44,45,46,3 1,32,33,34,35,36	5,668.00	0.00	71,102.00	
17/05/2024	RT	31501593	141001549	AP-1291/TI/35375520/522/PRASOON SIR/REPEAT WORK		0.00	522.00	70,580.00	
23/05/2024	RC		26024320	aasthasachdeva@okicici-414471417694 Bank Transfer		0.00	9,444.00	61,136.00	
27/05/2024	RC		26025719	aasthasachdeva@okicici-414823003597 Bank Transfer		0.00	2,096.00	59,040.00	
27/05/2024	JE	802426	2856608			2,096.00	0.00	61,136.00	
27/05/2024	JE	802426	2856608			0.00	2,096.00	59,040.00	
29/05/2024	IN	TIDEL/46003461	42003901		CHINTAN BHALLA DENTCARE ZIRCONIA SOLID PLUS MONOLITHIC CROWN/BRIDGE UPTO 3 UNITS-37	2,096.00	0.00	61,136.00	

Trans. Date	DocType	Trans. No	DocNo	Remarks	Patient Name / WorkType	Debit	Credit	Balance
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