



# Balance Statement

Invoices till 30/09/2024 not paid as on 26/10/2024

## DENTCARE DENTAL LAB PVT. LTD.

### HYD000063 - DR GOWDS DENTAL HOSPITAL

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
HYD	10/08/2024	TIHYD/46405584	SO	24086722961	CHUMKI GOSWAMI	DENTCARE ZIRCONIA ULTRA PLUS PFZ CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-23,24,25,26	12,579.00	0.00	12,579.00	12,579.00
HYD	10/08/2024	TIHYD/46405606	SO	24086780022	KRISHNA MURTHY	L C RESIN CLOSED IMPLANT SPECIAL TRAY PER TRAY-11 , DENTCARE ACRYLIC LIGHT CURE SPECIAL TRAY PER JAW-11	713.00	0.00	713.00	13,292.00
KER	15/08/2024	TIKER/45215628	SO	24076006132	A LAXMI	DENTCARE DMLS PFM IMPLANT CROWN/BRIDGE (DIRECT DEL.)-43,44,45,46,47	12,563.00	0.00	12,563.00	25,855.00
KER	30/08/2024	TIKER/45239713	SO	24087056003	MADHAV RATHI	DENTCARE ZIRCONIA ULTRA PLUS PFZ CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-11,21	6,290.00	0.00	6,290.00	32,145.00
KER	01/09/2024	TIKER/45243031	SO	24086857613	SAI SUDHA	DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-45,46 , DENTCARE DMLS PFM IMPLANT CROWN/BRIDGE (DIRECT DEL.)-45,46	10,673.00	0.00	10,673.00	42,818.00
							<b>42,818.00</b>	<b>0.00</b>	<b>42,818.00</b>	

After Adjusting Pending Cheques, If Any	:	<b>42,818.00</b>
Receipts Pending Reconciliation Or Settlement	:	<b>3,325.00</b>
Net Receivable	:	<b>39,493.00</b>

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

**Bank Account Details**  
 Bank Name : ICICI Bank  
 Virtual Account No: **DCJKHYD000063**  
 (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.