



Ledger Report

DENTCARE DENTAL LAB PVT. LTD.

From Date : 01/01/2019 To Date : 20/12/2024
KTM000093 - ULLAS BABY

							*Period Opening Bal.:	0.00
Trans. Date	DocType	Trans. No	DocNo	Remarks	Patient Name / WorkType	Debit	Credit	Balance
12/06/2022	IN	SA2200101022	1100850		SHINOJ 01 DENTCARE ZIRCONIA SOLID PLUS W/DIE-	1,960.00	0.00	1,960.00
06/07/2022	IN	SA2200135552	1135333		RONIA JOSEPH 01 DENTCARE ZIRCONIA SOLID PLUS W/DIE-	1,960.00	0.00	3,920.00
12/07/2022	IN	SA2200143546	1143314		SOPHY 01 DENTCARE ZIRCONIA SOLID PLUS W/DIE-	1,960.00	0.00	5,880.00
29/08/2022	RC		6060986	Bank Transfer		0.00	5,880.00	0.00
23/09/2022	IN	SA2200249455	1249055		MATHEW JOHN 266a. DENTCARE FLEX SEMI RIGID-MONOMER FREE 7-10 TEETH TEETH SETTING (UPPER)-11 ,12 ,13 ,14 ,15 ,16 ,17 ,25 ,26 ,27 , 265a. DENTCARE FLEX SEMI RIGID-MONOMER FREE 4-6 TEETH SETTING (LOWER)-11 ,12 ,13 ,14 ,15 ,16 ,17 ,25 ,26 ,27	4,709.00	0.00	4,709.00
29/09/2022	IN	SA2200259226	1258808		MATHEW JOHN 266b. DENTCARE FLEX SEMI RIGID-MONOMER FREE 7-10 TEETH ACRYLISING (UPPER)-11 ,12 ,13 ,14 ,15 ,16 ,17 ,25 ,26 ,27 , 265b. DENTCARE FLEX SEMI RIGID-MONOMER FREE 4-6 TEETH ACRYLISING (LOWER)-11 ,12 ,13 ,14 ,15 ,16 ,17 ,25 ,26 ,27	4,709.00	0.00	9,418.00
27/10/2022	RC		6087518	Bank Transfer		0.00	9,418.00	0.00
28/09/2023	IN	TI/35133982	31258881		JOANNA PINTO DENTCARE ALIGNERS PLANNING AND DESIGNING (CLEAR ALIGNER) PER CASE-	2,500.00	0.00	2,500.00
29/09/2023	IN	TI/35136998	31261892		JOANNA PINTO DENTCARE ALIGNERS PRIME 26 SPLINTS (CLEAR ALIGNER) PER PACK-	37,303.00	0.00	39,803.00
30/09/2023	IN	TI/35138527	31263422		JOANNA PINTO DENTCARE ALIGNERS RETAINER (CLEAR ALIGNER) PER SPLINT-	1,155.00	0.00	40,958.00
19/10/2023	RC		16093808	Cash Amount Received		0.00	38,458.00	2,500.00
28/10/2023	RT	31258881	131006824	For discount , permission by DS		0.00	2,500.00	0.00
22/10/2024	IN	TIKER/45321281	41328783		OT CAP CHANGING PRECISION ATTACHMENT PER UNIT-12,22,41,43,33 , DENTCARE ACRYLIC PLUS PD TOOTH ADD-ON SINGLE TOOTH-12,22,41,43,33 , DENTCARE ACRYLIC PLUS PD TOOTH ADD-ON ADDITIONAL TOOTH-12,22,41,43,33	5,284.00	0.00	5,284.00

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