



Balance Statement

Invoices till 13/08/2024 not paid as on 13/08/2024

DENTCARE DENTAL LAB PVT. LTD.

MVP000357 - ST THOMAS 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
KER	10/07/2024	TIKER/45155488	SO	24076190981	FATHIMA FARSANA	DENTCARE NOVA FULL METAL CROWN/BRIDGE-46	730.00	0.00	730.00	730.00
KER	11/07/2024	TIKER/45158563	SO	24076211832	SR LISMI	DENTCARE NOVA FULL METAL CROWN/BRIDGE-45,46 , DENTCARE NOVA PFM CROWN/BRIDGE (DIRECT DEL.)-45,46	3,506.00	0.00	3,506.00	4,236.00
KER	13/07/2024	TIKER/45161484	SO	24076236951	TOMCY JOSEPH	DENTCARE NOVA PFM CROWN/BRIDGE (DIRECT DEL.)-26,36	2,776.00	0.00	2,776.00	7,012.00
KER	31/07/2024	TIKER/45190123	SO	24076575731	NANCY MATHEW	DENTCARE NOVA FULL METAL CROWN/BRIDGE-46	730.00	0.00	730.00	7,742.00
KER	08/08/2024	TIKER/45203499	SO	24086731801	SR. LIS RANI	DENTCARE ACRYLIC LIGHT CURE DENTURE BASE WITH BITE BLOCK UPTO 5 TEETH-23,24,25,26	206.00	0.00	206.00	7,948.00
							7,948.00	0.00		7,948.00

After Adjusting Pending Cheques, If Any : **7,948.00**

Receipts Pending Reconciliation Or Settlement : **0.00**

Net Receivable : **7,948.00**

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

Bank Account Details

Bank Name :ICICI Bank
 Virtual Account No: **DCJKMVP000357**
 (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.