



Ledger Report

DENTCARE DENTAL LAB PVT. LTD.

From Date : 26/03/2024 To Date : 26/04/2024
PND000565 - PRIYASHA R

							*Period Opening Bal.:	32,516.00
Trans. Date	DocType	Trans. No	DocNo	Remarks	Patient Name / WorkType	Debit	Credit	Balance
27/03/2024	IN	TI/35395222	31521319		PRAKAH BALL ATTACHMENT PRECISION ATTACHMENT PER UNIT-11	4,683.00	0.00	37,199.00
03/04/2024	RC		26001044	priyawase28@oksbi-409466459815 Bank Transfer		0.00	4,500.00	32,699.00
05/04/2024	IN	TIKER/45008432	41008386		SINGARAVEL DENTCARE COCR CUSTOMIZED UCLA ABUTMENT PER UNIT-21 , ADIN NP ENGAGING CASTABLE ABUTMENT NP0045 (STOCK IMPLANT COMPONENT) PER UNIT-21 , DENTCARE NOVA GINGIVAL CERAMIC MEDIUM IMPLANT GINGIVA (ARTIFICIAL)-21 , DENTCARE NOVA PFM IMPLANT CROWN/BRIDGE (DIRECT DEL.)-21	7,686.00	0.00	40,385.00
06/04/2024	IN	TIKER/45009792	41009738		THILLAK KUMAR ADIN RP ANGLED ABUTMENT RS4015 (STOCK IMPLANT COMPONENT) PER UNIT-46 , DENTCARE DMLS PFM IMPLANT CROWN/BRIDGE (DIRECT DEL.)-46	4,214.00	0.00	44,599.00
08/04/2024	RC		26003230	Bank Transfer		0.00	8,000.00	36,599.00
08/04/2024	RC		26003618	Cash Cash Amount Received		0.00	12,500.00	24,099.00
09/04/2024	IN	TIKER/45013602	41013519		ANBAZHAGAN DENTCARE ZIRCONIA CLASSIC PFZ CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-23	3,846.00	0.00	27,945.00
10/04/2024	IN	TIKER/45015117	41015027		JOHNSON DURAI DENTCARE NOVA FACING CERAMIC CROWN/BRIDGE (CERAMIC LAYERING)-11,12,13,21,22,23	3,938.00	0.00	31,883.00
13/04/2024	RC		26005829	Bank Transfer		0.00	2,000.00	29,883.00
17/04/2024	IN	TIKER/45025641	41025492		JAYARAMAN DENTCARE ACRYLIC INJECT UPPER & LOWER CD (INJECTION & POLISHING)-11,12,13,14,15,16,17, 21,22,23,24,25,26,27,41,42,43,44,4 5,46,47,31,32,33,34,35,36,37 , READY MADE MESH UPPER (CD)-11,12,13,14,15,16,17,21,22,2 3,24,25,26,27,41,42,43,44,45,46,47 ,31,32,33,34,35,36,37	6,195.00	0.00	36,078.00
23/04/2024	IN	TIKER/45034258	41034057		SURESH DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-45 , ADIN RP STRAIGHT ABUTMENT RS3802 (STOCK IMPLANT COMPONENT) PER UNIT-45 , DENTCARE DMLS PFM IMPLANT CROWN/BRIDGE (DIRECT DEL.)-45	9,071.00	0.00	45,149.00

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