



Ledger Report

DENTCARE DENTAL LAB PVT. LTD.

From Date : 01/04/2024 To Date : 31/05/2024
VDK000207 - SALMAN

							*Period Opening Bal.:	67,533.00
Trans. Date	DocType	Trans. No	DocNo	Remarks	Patient Name / WorkType	Debit	Credit	Balance
23/04/2024	IN	TIKER/45034835	41034625		ATHULYA DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-13,14,15,16	6,271.00	0.00	73,804.00
24/04/2024	IN	TIKER/45035846	41035629		VINODAN DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-46,47,48	4,703.00	0.00	78,507.00
24/04/2024	IN	TIKER/45036697	41036470		HAMEED DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-11,12,13	4,703.00	0.00	83,210.00
24/04/2024	IN	TIKER/45036948	41036719		FAINATH DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-24,25,26,27	6,271.00	0.00	89,481.00
25/04/2024	IN	TIKER/45037598	41037367		FATHIMA DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-24,25,26,27	6,271.00	0.00	95,752.00
08/05/2024	IN	TIKER/45056928	41057876		ABDULLA KK DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-33,34,35,36	6,271.00	0.00	102,023.00
08/05/2024	IN	TIKER/45057788	41058728		NUZHA DENTCARE ZIRCONIA ULTRA PLUS PFZ-CB CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-11,21	6,290.00	0.00	108,313.00
17/05/2024	IN	TIKER/45071946	41072781		HASEENA DENTCARE ZIRCONIA ULTRA PLUS PFZ-CB CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-14,15,16	9,434.00	0.00	117,747.00
17/05/2024	IN	TIKER/45072103	41072938		MOHITH DENTCARE ZIRCONIA ULTRA PLUS PFZ CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-36	3,145.00	0.00	120,892.00
23/05/2024	IN	TIKER/45081958	41082730		MANJIMA DENTCARE ZIRCONIA ULTRA PLUS PFZ CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-25	3,145.00	0.00	124,037.00
27/05/2024	IN	TIKER/45086091	41086843		SUSHAMA DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-11,12,13,21,22,23	9,406.00	0.00	133,443.00
28/05/2024	IN	TIKER/45087969	41088709		VIJAYAN DENTCARE DMLS PFM CROWN/BRIDGE (DIRECT DEL.)-47	1,568.00	0.00	135,011.00
29/05/2024	RC		26030699	Bank Transfer		0.00	30,000.00	105,011.00
31/05/2024	IN	TIKER/45093860	41094559		SUSHAMA DENTCARE ZIRCONIA ULTRA PLUS PFZ-CB CROWN/BRIDGE UPTO 6 UNITS (DIRECT DEL.)-11,12,13,21,22,23	18,869.00	0.00	123,880.00

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