



BILL TO :

[000160] IPLOY STAFFING SOLUTIONS
 CEBU CITY, CEBU PHILIPPINES 6000, Cebu City (Capital), Cebu

Priority No.	0032
SO No.	417529
S.O Date	02/27/2023
Terms	30 Days
Amount Due	P1,050.00

PATIENT INFORMATION

PATIENT ID : 053778	GENDER : Male
PATIENT NAME : LUNDAY, JUNEKEMP, CALDINO	BIRTHDATE : 06/06/2003
PATIENT ADDRESS : ZONE 6 SITIO DAYCARE, San Isidro, City Of Talisay, Cebu	AGE : 19
MOBILE NO. : 09812625387	CIVIL STATUS : Single
EMAIL ADDRESS : DELIVERY	SC/PWD ID :
REQUESTING PHYSICIAN :	HMO CARD NO. :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS	PATIENT STATUS : FOR EMPLOYMENT
RESULT DELIVERY : PICKUP	EMAIL : DELIVERY

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME PE CHEST PA, CBC, U/A, (SE) DRUG TEST (NOTE: PLEASE COMPLY THE DRUG TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	1.00	1,050.00	1,050.00	TOTAL SALES : 1,050.00 VARIABLE SALES : 0.00 V-A-T : 0.00 SC/PWD DISCOUNT : 0.00 AMOUNT DUE : 1,050.00

*Bro done
2/27/23*

VALIDATED
 VERIFIED BY
 BY: *[Signature]*
 Signature Over Printed Name

PREPARED BY: *[Signature]*
 Juevelina N. Sevilla

ACKNOWLEDGED BY:
 Signature Over Printed Name

**** THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM ****

Medgrupe Polyclinics & Diagnostic Center, Inc.
 2nd Level, APM Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
 Tel # (032) 232-2273/266-3245
 www.primecarecebu.com

NAME : LUNDAY, JUNEKEMP, CALDINO	SO NO. : 417529
BIRTHDAY : 06/06/2003	AGE : 20
COMPANY : IPLOY STAFFING SOLUTIONS	DATE : 02/27/2023
	GENDER : Male

Adult Chest PA View (CXR-PA), COMPLETE BLOOD COUNT (CBC), URINALYSIS (U/A), STOOL EXAM (FECALYSIS), DRUG TESTING,