



**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

**SERVICE ORDER**



**BILL TO :**

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

Priority No.	0005
SO No.	426865
S.O Date	06/13/2023
Terms	30 Days
Amount Due	P800.00

**PATIENT INFORMATION**

<b>PATIENT ID</b> :	062689	<b>GENDER</b> :	Male
<b>PATIENT NAME</b> :	PEÑA, LEANDRO, GUMORA	<b>BIRTHDATE</b> :	08/04/2003
<b>PATIENT ADDRESS</b> :	CABREROS ST., Basak San Nicolas, Cebu City (Capital), Cebu	<b>AGE</b> :	19
<b>MOBILE NO.</b> :	09616214969	<b>CIVIL STATUS</b> :	Single
<b>EMAIL ADDRESS</b> :	LEANDRO.PENA80403@GMAIL.COM	<b>SC/PWD ID</b> :	
<b>REQUESTING PHYSICIAN</b> :		<b>HMO CARD NO.</b> :	
<b>COMPANY/REFERRED BY</b> :	IPLOY STAFFING SOLUTIONS	<b>PATIENT STATUS</b> :	FOR EMPLOYMENT
<b>RESULT DELIVERY</b> :	DELIVERY		

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME CHEST XRAY CBC UA 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	800.00	800.00	<b>TOTAL SALES</b> : 800.00 <b>VARIABLE SALES</b> : 0.00 <b>V-A-T</b> : 0.00 <b>SC/PWD DISCOUNT</b> : 0.00 <b>AMOUNT DUE</b> : 800.00

<p><b>PREPARED BY:</b>          Juevelina N. Revilla</p>	<p><b>ACKNOWLEDGED BY:</b>          Signature Over Printed Name</p>
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**VALIDATED**  
 Signature Over Printed Name  
 DATE CREATED: 06/13/2023 07:33 AM