



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

SERVICE ORDER



BILL TO :

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

Priority No.	0098
SO No.	463494
S.O Date	05/27/2024
Terms	30 Days
Amount Due	P800.00

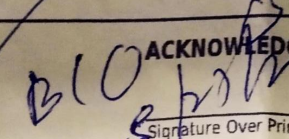
PATIENT INFORMATION

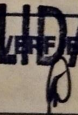
PATIENT ID : 100745
PATIENT NAME : RECEROTE, KATHLEEN, SAYSON
PATIENT ADDRESS : Lagtang, City Of Talisay, Cebu
MOBILE NO. : 09761939562
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 05/11/2000
AGE : 24
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME »PE CHEST PA CBC UA SE DRUG TEST (NOTE: PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	1.00	800.00	800.00

SUMMARY OF CHARGES	
TOTAL SALES	: 800.00
VARIABLE SALES	: 0.00
V-A-T	: 0.00
SC/PWD DISCOUNT	: 0.00
AMOUNT DUE	: 800.00

<p>PREPARED BY: Floren A. Manigos</p>	<p>ACKNOWLEDGED BY:  Signature Over Printed Name</p>
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VALIDATED
 BY: 
 Signature Over Printed Name

I acknowledge that I was duly informed by Prime Care Alpha employee to pay the above mentioned tests, I have reviewed the prices listed on the (SO) and agree to the changes associated with the products and services.

Date Created: 05/27/2024 03:18 PM

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