



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.	0017
SO No.	464675
S.O Date	06/10/2024
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 101221
PATIENT NAME : CAPUYAN, SHELLA MAE, BUENO
PATIENT ADDRESS : MASIWA, Marigondon, Lapu-Lapu City (Spon), Cebu
MOBILE NO. : 09333581910
EMAIL ADDRESS : CAPUYANSHELLAMAE@GMAIL.COM
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 04/20/1999
AGE : 25
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME »PE CHEST PA, CBC, UA, SE DRUG TEST (NOTE: PLEASE COMPLY WITH THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	1	800.00	800.00	TOTAL SALES : 800.00 VATABLE SALES : 0.00 V-A-T : 0.00 SC/PWD DISCOUNT : 0.00 AMOUNT DUE : 800.00

PREPARED BY: Mitchie C. De Guzman	ACKNOWLEDGED BY: Signature Over Printed Name	VERIFIED BY: Signature Over Printed Name
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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: 06/10/2024 08:42 AM

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

VALIDATED
 BY: