



Republic of the Philippines
Province of Cebu
City of Naga



BARANGAY WEST POBLACION
Email address: *Wespoblacion@gmail.com*
TIN No:

JOSE GINOO HEREDIANO
Barangay Captain

Barangay Councilmen &
Committee Chairmanship

HON. ROLANDO VILLARICO
Committee on Peace and Order

HON. VIOLETA C. ALFEREZ
Committee of Senior Citizen

HON. VIOLETA C. ALFEREZ
Committee on Appropriation

HON. MARIA HAZEL M. GUTIERREZ
Committee on Infrastructure

HON. VIOLETA C. ALFEREZ
Committee on Education

HON. MARIA HAZEL M. GUTIERREZ
Committee on Women & Family

HON. ALFREDO TUGAON
*Committee on Agriculture
Environment*

HON. VIOLETA C. ALFEREZ
*Committee on Health
Committee on Solid Waste
Management*

OFFICE OF THE PUNONG BARANGAY
BARANGAY CLEARANCE

TO WHOM IT MAY CONCERN:

This is to certify that China J. Prionas, 22 years of age, S (civil status), Filipino, is a bona fide resident of Purok Happy Valley in this Barangay, and who is personally known to me with good moral character and a law-abiding citizen of this community.

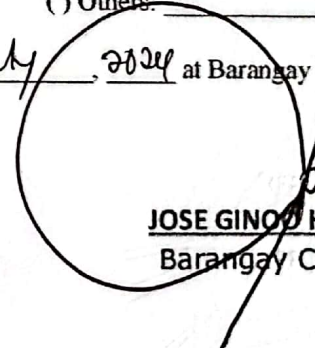
This certify further that he/she has not committed, nor been involved in any kind of unlawful or illegal activities in this barangay.

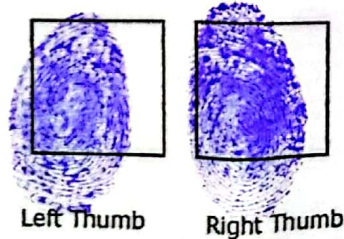
This certification is hereby issued upon the request of Mr./Ms./Mrs. China J. Prionas to support his/her request or application for:

- | | |
|--|--|
| <input type="checkbox"/> Overseas Employment | <input type="checkbox"/> School Purposes |
| <input checked="" type="checkbox"/> Local Employment | <input type="checkbox"/> Building Permit |
| <input type="checkbox"/> Police Clearance | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Postal I.D. | <input type="checkbox"/> Fencing Permit |
| <input type="checkbox"/> Electrical Connection | <input type="checkbox"/> SSS/Philhealth/PAG-IBIG |
| <input type="checkbox"/> Business Permit | <input type="checkbox"/> Animal Bite Vaccination |
| <input type="checkbox"/> Water Connection | <input type="checkbox"/> Others: _____ |

Issued this 22nd day of July, 2024 at Barangay West Poblacion, City of Naga, Cebu.


Applicant's Signature


JOSE GINOO HEREDIANO
Barangay Captain



Not valid without seal

Res. Cert. No: _____
Issued on : _____
Issued at : _____

NAGA | Service with a ❤️
Alang Ganto
O.R. No : _____
Date Paid : _____
Amount : _____



Medgruppe 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



BILL TO :

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

Priority No.	0042
SO No.	468803
S.O Date	07/22/2024
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 103232
PATIENT NAME : BRIONES, CHINA, JUANILLO
PATIENT ADDRESS : West Poblacion, City Of Naga, Cebu
MOBILE NO. : 09493590612
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 07/08/2002
AGE : 22
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : CONSULTATION

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES		
P127	IPLOY PEME	1.00	800.00	800.00	TOTAL SALES	:	800.00
	» PE CHEST PAX (BC) UA P. 6/1/2024				VARIABLE SALES	:	0.00
	DRUG TEST (NOTE: PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)				V-A-T	:	0.00
					SC/PWD DISCOUNT	:	0.00
					AMOUNT DUE	:	800.00

PREPARED BY DATE:

Floren A. Manigos

JUL 22 2024

Signature Over Printed Name

ACKNOWLEDGED BY:

VERIFIED 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 (50) and agree to the changes associated with the products and services.

Date Created: 07/22/2024 10:40 AM

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