



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



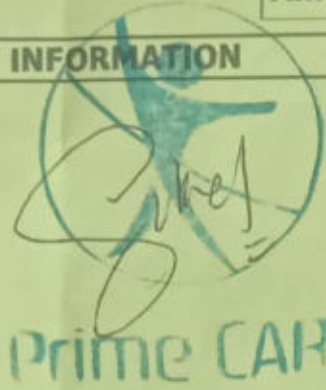
BILL TO :

[000160] IPLOY STAFFING SOLUTIONS
 16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City
 (Capital), Cebu
 09177097074 / 09171575430

| | |
|--------------|------------|
| Priority No. | 0023 |
| SO No. | 480957 |
| S.O Date | 11/25/2024 |
| Terms | 30 Days |
| Amount Due | P800.00 |

PATIENT INFORMATION

PATIENT ID : 112574
PATIENT NAME : INAO, JIAN MAY, CAMONGAY
PATIENT ADDRESS : Landahan, Toledo City, Cebu
MOBILE NO. : 0991 418 0189
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY



GENDER : Female
BIRTHDATE : 05/05/2001
AGE : 23
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 |
| VATABLE SALES | 0.00 |
| V-A-T | 0.00 |
| SC/PWD DISCOUNT | 0.00 |
| AMOUNT DUE | 800.00 |

PREPARED BY:
 Floren A. Manigos

ACKNOWLEDGED BY:
 [Signature]
 11/25/24
 Signature Over Printed Name

VALIDATED BY:
 [Signature]
 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: 11/25/2024 08:38 AM

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