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

SERVICE ORDER

Priority No.	**0024**
SO No.	**489457**
S.O Date	**02/10/2025**
Terms	**30 Days**
Amount Due	**₱800.00**

BILL TO : 20/25

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

Prime CARE ALPHA

PATIENT INFORMATION

PATIENT ID	: 118866	**GENDER**	: Female
PATIENT NAME	: MELANCOLICO, JACINTH, MENTOY	**BIRTHDATE**	: 08/17/1999
PATIENT ADDRESS	: Lahug (Pob.), Cebu City (Capital), Cebu	**AGE**	: 25
MOBILE NO.	: 0997 600 2268	**CIVIL STATUS**	: Single
EMAIL ADDRESS	: .	**SC/PWD ID**	:
REQUESTING PHYSICIAN	:	**HMO CARD NO.**	:
COMPANY/REFERRED BY	: IPLOY STAFFING SOLUTIONS	**PATIENT STATUS**	: FOR EMPLOYMENT
RESULT DELIVERY	: DELIVERY		

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME »PE ✓, CHEST PA ✓, CBC ✓, UA ✓, SE waived, 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

BIOMETRICS DONE
DATE: 10 FEB 2025

SUMMARY OF CHARGES		
TOTAL SALES	:	800.0
VATABLE SALES	:	0.0
V-A-T	:	0.0
SC/PWD DISCOUNT	:	0.0
AMOUNT DUE	:	800.0

PREPARED BY:
Arissa Marie L. Armenion

ACKNOWLEDGED BY:
Signature Over Printed Name

VERIFIED BY:
VALIDATED
Signature Over Printed Name

BY:

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: 02/10/2025 08:51 AM

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