



Medgrappe 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.	0009
SO No.	489608
S.O Date	02/11/2025
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 119171
PATIENT NAME : BUNGALSO, ROCHELLE JOY, CUNY
PATIENT ADDRESS : PHASE 1 BULACAO ST., Pardo (Pop., Cebu City (Capital), Cebu City
MOBILE NO. : 0981 557 7404
EMAIL ADDRESS : brochellejoy@gmail.com
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 03/04/2002
AGE : 22
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

PRIME CARE
 Cebu City (Capital), Cebu City

JS

CODE PARTICULARS/PROCEDURE

P127 IPLOY PEME 2909
 » PE CHEST PA CBC UA *ds* SE *Wendy*
 DRUG TEST (NOTE: PLEASE COMPLY ALL
 THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU
 WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT
 AVAILMENT.)

QTY	UNIT PRICE	AMOUNT
1.00	800.00	800.00

BIO METRICS DONE DATE: 11 FEB 2025

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

PREPARED BY:

Wendy N. Urtal

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

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: 02/11/2025 07:49 AM

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