



**Medgrupppe Polyclinics & Diagnostic Center, Inc.**  
 2nd Level, APM Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City  
 Tel # (032) 232-2273/266-3245  
 www.primicarealpha.ph



**SERVICE ORDER**

**BILL TO :**

*10/30 S*

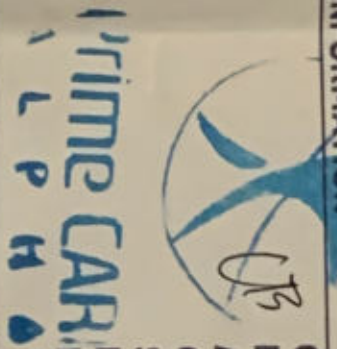
**[000160] IPLOY STAFFING SOLUTIONS**

16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu City  
 (Capital), Cebu  
 09177097074 / 09171575430

Priority No.	0061
SO No.	490328
S.O Date	02/17/2025
Terms	30 Days
Amount Due	P800.00

**PATIENT INFORMATION**

**PATIENT ID** : 069402  
**PATIENT NAME** : YABO, JULLIAN TROY, AMORES  
**PATIENT ADDRESS** : Pusok, Lapu-Lapu City (Opon), Cebu  
**MOBILE NO.** : 0968 752 0310



**GENDER** : Male  
**BIRTHDATE** : 10/27/2003  
**AGE** : 21  
**CIVIL STATUS** : Single  
**SC/PWD ID** :  
**HMO CARD NO.** :  
**PATIENT STATUS** : WALK-IN

**EMAIL ADDRESS** :  
**REQUESTING PHYSICIAN** :  
**COMPANY/REFERRED BY** : IPLOY STAFFING SOLUTIONS  
**RESULT DELIVERY** : DELIVERY

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY/STEM *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

**PREPARED BY:**

Cristian Mill B. Mesa

**ACKNOWLEDGED BY:**

*[Signature]*  
 Signature Over Printed Name

**VALIDATED BY**

*[Signature]*  
 BY: Signature Over Printed Name

Date Created: 02/17/2025 11:06 AM

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

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.