



**BILL TO :**

**[000160] IPLOY STAFFING SOLUTIONS**

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

Priority No.	0006
SO No.	492200
S.O Date	03/03/2025
Terms	30 Days
Amount Due	P800.00

**PATIENT INFORMATION**

**PATIENT ID** : 121208  
**PATIENT NAME** : BARCELON, RUWEGIE, CADAPAN  
**PATIENT ADDRESS** : Sambag I (Pob.), Cebu City (Capital), Cebu  
**MOBILE NO.** : 0985 569 9853  
**EMAIL ADDRESS** :  
**REQUESTING PHYSICIAN** :  
**COMPANY/REFERRED BY** : IPLOY STAFFING SOLUTIONS  
**RESULT DELIVERY** : DELIVERY



**Prime CARE**  
 A L O H A

**GENDER** : Male  
**BIRTHDATE** : 06/27/2000  
**AGE** : 24  
**CIVIL STATUS** : Single  
**SC/PWD ID** :  
**HMO CARD NO.** :  
**PATIENT STATUS** : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME »PE, CHEST PA, CBC, UA, SE <i>in mixed</i> 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	<b>TOTAL SALES</b> : 800.00 <b>VARIABLE SALES</b> : 0.00 <b>V-A-T</b> : 0.00 <b>SC/PWD DISCOUNT</b> : 0.00 <b>AMOUNT DUE</b> : 800.00

**BIOMETRICS DONE**

**PREPARED BY:** DATE: *3/3/25*

Floren A. Manigos

**ACKNOWLEDGED BY:**

Signature Over Printed Name

**VALIDATED**

BY: Signature Over Printed Name