



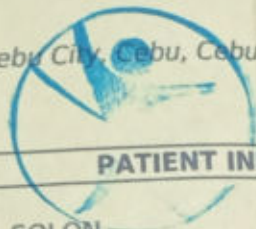
Medgrupe Polyclinics & Diagnostic Center, Inc.
 2nd Level, APM Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
 Tel # (032) 232-2273/266-3245
 www.primcarealpha.ph

BILL TO :

2/20

[000160] IPLOY STAFFING SOLUTIONS

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



PATIENT INFORMATION

PATIENT ID : 064494
PATIENT NAME : AGUILAR, DOREJUN, SOLON
PATIENT ADDRESS : Kalunasan, Cebu City (Capital), Cebu
MOBILE NO. : 0906 083 7953
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

Prime Care Alpha
Signature

GENDER : Male
BIRTHDATE : 04/28/1990
AGE : 34
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME	1.00	800.00	800.00

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

Handwritten notes: 4270, PE, CHEST PA, CBC, UA, SE W
 DRUG TEST (NOTE: PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)

BIOMETRICS DONE

DATE: 3/3/25

PREPARED BY:
 Floren A. Manigos

ACKNOWLEDGED BY:
Signature of Dorejun Solon Aguilar
 Signature Over Printed Name

VERIFIED BY:
VALIDATED
 Signature Over Printed Name

Date Created: 03/03/2025 09:34 AM

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.

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



SERVICE ORDER

Priority No.	0029
SO No.	492224
S.O Date	03/03/2025
Terms	30 Days
Amount Due	P800.00