



Medgrupe 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 :

20/25 *[Signature]*

[000160] IPLOY STAFFING SOLUTIONS

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

Priority No.	0041
SO No.	493001
S.O Date	03/10/2025
Terms	30 Days
Amount Due	₱800.00

PATIENT INFORMATION

PATIENT ID : 122055
PATIENT NAME : MAGNO, JURREL FRANCIS, REBUSORA
PATIENT ADDRESS : San Roque (Ciudad), Cebu City (Capital), Cebu
MOBILE NO. : 0916 310 2654
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY



GENDER : ~~Male~~ female
BIRTHDATE : 09/25/1994
AGE : 30
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME »PE <i>l</i> , CHEST PA <i>l</i> , CBC <i>l</i> , UA <i>l</i> , SE <i>l</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

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Bro 3/10/25

PRIME CARE ALPHA

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

VALIDATED
VERIFIED BY:

PREPARED BY:

Floren A. Manigos

ACKNOWLEDGED BY:

Signature Over Printed Name

BY:

Signature Over Printed Name