



Medgruppe 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

WITH MENSEY PLEASE COME IN
 DATE SCHEDULED 4/24/25
 OTHERWISE YOU WILL HAVE TO
 PAY P

Priority No.	0059
SO No.	496697
S.O Date	04/21/2025
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 123998
PATIENT NAME : VARGAS, JEAULENE JANNE, BEATISULA
PATIENT ADDRESS : Basak, Lapu-Lapu City (Opon), Cebu
MOBILE NO. : 0907 037 5999
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 03/15/2005
AGE : 20
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 or 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.)	1.00	800.00	800.00	TOTAL SALES : 800.00 VATABLE SALES : 0.00 V-A-T : 0.00 SC/PWD DISCOUNT : 0.00 AMOUNT DUE : 800.00



PRIME CARE
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PREPARED BY: Floren A. Manigos	ACKNOWLEDGED BY: <u>BLO</u> 4/21/25 Signature Over Printed Name	VERIFIED BY: VALIDATED Signature Over Printed Name
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Page 1 of 1 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. BY: Date Created: 04/21/2025 11:07 AM

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