



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

**BILL TO :**

**[000160] IPLOY STAFFING SOLUTIONS**  
 16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City  
 (Capital), Cebu  
 09177097074 / 09171575430



**SERVICE ORDER**

|              |            |
|--------------|------------|
| Priority No. | 0044       |
| SO No.       | 497333     |
| S.O Date     | 04/28/2025 |
| Terms        | 30 Days    |
| Amount Due   | P800.00    |

**PATIENT INFORMATION**

**PATIENT ID** : 124232  
**PATIENT NAME** : POJAS, JESHIA MARIE,  
**PATIENT ADDRESS** : Guadalupe, Cebu City (Capital), Cebu  
**MOBILE NO.** : 0922 269 1208  
**EMAIL ADDRESS** :  
**REQUESTING PHYSICIAN** :  
**COMPANY/REFERRED BY** : IPLOY STAFFING SOLUTIONS  
**RESULT DELIVERY** : DELIVERY

**GENDER** : Female  
**BIRTHDATE** : 12/04/1999  
**AGE** : 25  
**CIVIL STATUS** : Single  
**SC/PWD ID** :  
**HMO CARD NO.** :  
**PATIENT STATUS** : FOR EMPLOYMENT

**CODE** : P127  
**PARTICULARS/PROCEDURE** :  
 IPLOY PEME : 1.00  
 \*PE CHEST PAIN CBC & UA : 800.00  
 DRUG TEST :  
 (NOTE: PLEASE COMPLETE ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)

| QTY  | UNIT PRICE | AMOUNT |
|------|------------|--------|
| 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 |

**PREPARED BY:**

Floren A. Manigos

**ACKNOWLEDGED BY:**

Signature Over Printed Name

**VALIDATED**

**VERIFIED BY:**  
 BY: Date Created: 04/28/2025 11:02 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 \*\*\*\*