

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

BILL TO :

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



Priority No.	0058
SO No.	497347
S.O Date	04/28/2025
Terms	30 Days
Amount Due	P800.00

PATIENT ID : 124244
PATIENT NAME : MEGUIISO, VANESSA, BONTUYAN
PATIENT ADDRESS : Talamban, Cebu City (Capital), Cebu
MOBILE NO. : 0950 412 9545
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

PATIENT INFORMATION
GENDER : Female
BIRTHDATE : 02/14/2001
AGE : 24
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

CODE : P127
PARTICULARS/PROCEDURE : IPLOY PEME
DRUG TEST : CHEST PA
 (NOTE: PLEASE COMPLY ALL THE FOLLOWING TESTS WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)

PREPARED BY:
 Floren A. Manigos

ACKNOWLEDGED BY:
 Signature Over Printed Name

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 charges associated with the products and services.

THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM

Date Created: 04/28/2025 12:47 PM

SUMMARY OF CHARGES

TOTAL SALES	800.00
VATABLE SALES	0.00
V-A-T	0.00
SC/PWD DISCOUNT	0.00
AMOUNT	800.00

VALIDATED
 VERIFIED BY:

BY:
 Signature Over Printed Name