

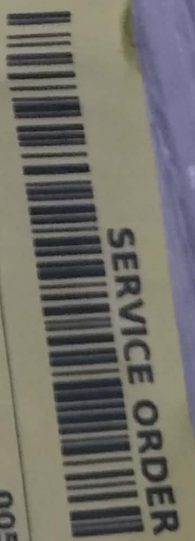


Medgroup Polyclinics & Diagnostic Center, Inc.
 2nd Level, APM Center Bldg. A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
 Tel # (032) 232-2273/2266-3245
 www.primicarealpha.ph

BILL TO :

on date scheduled
 2/4/26 otherwise you will

10001601 IPLOY STAFFING SOLUTIONS
 16th floor, One Mortgage, Archbishop Reyes Ave, Cebu City, Cebu City
 (Capital), Cebu
 09177097074 / 09171575430



SERVICE ORDER

Priority No.	0059
SO No.	521473
S.O Date	01/26/2026
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 145804
 PATIENT NAME : OCAMPO, GLENA ROSE, YOUNG
 PATIENT ADDRESS : Inayawan, Cebu City (Capital), Cebu
 MOBILE NO. : 0995 625 0496
 EMAIL ADDRESS : ocamplena@gmail.com
 REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY

GENDER : Female
 BIRTHDATE : 05/19/2000
 AGE : 25
 CIVIL STATUS : Single
 SC/PWD ID :
 HMO CARD NO. :
 PATIENT STATUS : FOR EMPLOYMENT

CODE : P127
 PARTICULARS/PROCEDURE : IPLOY PEME
 CHEST PAIN CBC
 DRUG TEST (NO) PLEASE COMPLY 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

BIOMETRICS DONE
 DATE: JAN 26 2026

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:

Dante P. Tampus

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

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 (ISO) and agree to the changes associated with the products and services.

THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM