



Prime Care Alpha Polyclinical & Diagnostic Center, Inc.
 2nd Level, APM Centrale, 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

Priority No.
 SO No.
 S.O Date
 Terms
 Amount Due

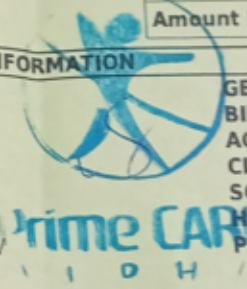
SERVICE ORDER

0008
 524482
 02/16/2026
 30 Days
 P800.00

PATIENT INFORMATION

PATIENT ID : 125850
 PATIENT NAME : CARACENA, MICHAEL, MOLINA
 PATIENT ADDRESS : Apas, Cebu City (Capital), Cebu
 MOBILE NO. : 0916 852 7049
 EMAIL ADDRESS : michaelcaracena19@gmail.com
 REQUESTING PHYSICIAN : 18007
 COMPANY/REFERRED BY : TELETECH OFFSHORE INVESTMENTS B.V
 RESULT DELIVERY : DELIVERY

GENDER : Male
 BIRTHDATE : 08/05/2001
 AGE : 24
 CIVIL STATUS : Single
 SC/PWD ID :
 HMO CARD NO. :
 PATIENT STATUS : FOR EMPLOYMENT



CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME PE, CHEST PA, CBC, UA, SE <u>10/16/26</u> 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

BIOMETRICS DONE
 DATE: FEB 16 2026

SUMMARY OF CHARGES

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

PREPARED BY:
 Cedric S. Ytang

ACKNOWLEDGED BY:
 Signature Over Printed Name

VALIDATED
 VERIFIED BY:
 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 changes associated with the products and services.

Date Created: 02/16/2026 08:19 AM

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