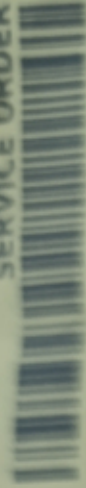




Medgrappe Polyclinics & Diagnostic Center, Inc.
 2nd Level, APM Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
 Tel # (032) 232-2273/266-3245
 www.primecarealpha.ph

SERVICE ORDER



BILL TO :

[000160] IPLOY STAFFING SOLUTIONS

16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City
 (Capital), Cebu
 09177097074 / 09171575430

Priority No.	0003
SO No.	52668Z
S.O Date	03/09/2026
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 150875
 PATIENT NAME : TORREMOCHA, ALJEN,
 PATIENT ADDRESS : Dawis Sur, Carmen, Cebu
 MOBILE NO. : 0999 507 569
 EMAIL ADDRESS : aljenbtorremocha@gmail.com

GENDER : Female
 BIRTHDATE : 11/23/2001
 AGE : 24
 CIVIL STATUS : Single
 SC/PWD ID :
 HMO CARD NO. :
 PATIENT STATUS : FOR EMPLOYMENT

PRIME CARE
 I P H P

REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME	1.00	800.00	800.00	800.00
	>PE CHEST PA, CBC, UA, SE, WOUND				0.00
	DRUG TEST				0.00
	THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU DATE:				0.00
	WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT				800.00
	AVAILMENT.)				

MAR 09 2026

PREPARED BY:

Dante P. Tampus

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

Signature Over Printed Name

Date Created: 03/09/2026 07:45 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 ****