Medgruppe 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.	**0044**
SO No.	**527414**
S.O Date	**03/16/2026**
Terms	**30 Days**
Amount Due	**₱800.00**

PATIENT INFORMATION

PATIENT ID : 151145
PATIENT NAME : GAYONA, RUFA MAE, ABANCIA
PATIENT ADDRESS : Hippodromo, Cebu City (Capital), Cebu
MOBILE NO. : 0981 233 8013
EMAIL ADDRESS : .
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 02/24/2001
AGE : 25
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 19 ivc d 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

SUMMARY OF CHARGES

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

Prime CARE

BIOMETRICS DONE
DATE: MAR 16 2026

PREPARED BY:
Cedric S. Ytang

ACKNOWLEDGED BY:
Signature Over Printed Name

VERIFIED BY:
VALIDATED
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: 03/16/2026 08:50 AM

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