


# Panamed

## EMPLOYEE'S BENEFIT REIMBURSEMENT FORM

EMP. NO: 618	EMPLOYEE'S NAME LORENA C. RABACA	DATE: 8/27/20
POSITION/DESIGNATION: TL	DIVISION / DEPARTMENT: SMD	NATURE OF BENEFIT: <input checked="" type="checkbox"/> DENTAL <input type="checkbox"/> OPTICAL <input type="checkbox"/> MEDICINE

PARTICULAR/DESCRIPTION		AMOUNT
Dental Procedure		3,600.00
CHECKED BY: 	APPROVED BY:	TOTAL AMOUNT 3,600.00

PER-12 - REV: 07.08.97

### DR. RHEBECCA MARIE O. ABAYON

Joelino Building, 4th Floor Room 4-D,  
Sanciangko St., Kalubihan Cebu City  
Prop. Rhebecca Marie O. Abayon  
TIN: 478-140-339-000 Non-Vat

THIS OFFICIAL RECEIPT SHALL BE VALID FOR  
FIVE (5) YEARS FROM THE DATE OF ATP

No. 1257

DATE: AUGUST 26, 2020

OFFICIAL RECEIPT

oldbe  
Org

CUSTOMER NAME: LORENA RABACA		TIN: 219-866-366-880	ADDRESS: TALISAY CITY	
BUSINESS STYLE: DENTAL CLEANING RESTORATION #35, #36		SCA/PWD NO.:	SIGNATURE	
IN PAYMENT OF THE FOLLOWING SERVICES/ TRANSACTION/DESCRIPTION		QTY.	UNIT PRICE	AMOUNT ₱
		1		3,600
PRINTER'S NAME:		TIN:	ADDRESS:	PRINTER'S ACCREDITATION NO.
GOLDBERG PRINTING SERVICES		228-167-252-000 NON-VAT	0571 Camagong St., Lahug Cebu City	001 MP20190000000013
DATE ISSUED:		EXPIRY DATE:		
March 01, 2019		March 01, 2024		
PTU NO.:	BOX/BLT. NO.:	SETS:	COPIES PER SET:	SERIAL NO.:
(FOR LOOSELEAF)	25 BLT.S.	50	2X	1251-2500
BIR ATP NO.:		DATE ISSUED:		
2AU0002442217		02-28-2020		
VALID UNTIL:		02-28-2025		
TOTAL SALES				
LESS: SCA/PWD DISC.				
TOTAL DUE				
LESS: WITHHOLDING				
TOTAL AMOUNT DUE 3,600				
SALES SUBJ. TO PT EXEMPT SALES				
[ ] CASH [ ] CHECK [ ] CREDIT				
CASHIER/AUTHORIZED PERSON				
"THIS DOCUMENT IS NOT VALID FOR CLAIM OF INPUT TAXES"				