



DMMC INSTITUTE OF HEALTH SCIENCES, INC.
NEWBORN SCREENING CENTER - SOUTHERN LUZON

3rd Floor DMMC-IHS Building
#143 Narra Street, Mountview Subd. Tanauan City, Batangas, 4232 Philippines
Phone No. (02) 400-1720 | Mobile No. 0931-010-1640
TeleFax No. (043) 702-7719 | (043) 341-6032
Email Add: accounting2@nscsl.com.ph / purchasing@nscsl.com.ph



STATEMENT OF ACCOUNT

SOLD TO: ABEST EXPRESS INC
FACILITY CODE:
TYPE: PRIVATE

SOA: 202503366
DATE: 10/29/2025
TERM:
DUE DATE: 11/12/2025

| QTY | DESCRIPTION | UNIT PRICE | AMOUNT |
|-----|-----------------------------------|------------|--------------|
| 0 | LOST/DAMAGE NBS SAMPLES | 600.00 | - |
| 1 | LOST NBS RESULT | 200.00 | Php 200.00 |
| 16 | Courier Pouch with Documents Only | 63.00 | Php 1,008.00 |
| 2 | Misrouted NBS Results | 63.00 | Php 126.00 |
| | | - | - |
| | | | Php 1,334.00 |

Payment By:

- Cheque: ALL CHEQUE PAYMENTS SHOULD BE MADE PAYABLE TO:
DMMC INSTITUTE OF HEALTH SCIENCES INC - NSC - SOUTHERN LUZON
- Bank: Process payments to the following account in Philippine Peso (Php)

Bank: PHILIPPINE NATIONAL BANK (PNB) *** USE PAYMENT SLIP
Branch: BATANGAS - TANAUAN
Account Name: DMMC INSTITUTE OF HEALTH SCIENCES INC - NSC - SOUTHERN LUZON
Account Number: 248970004099

REFERENCE NO: **SL**

Bank: LAND BANK OF THE PHILIPPINES (LBP) *** USE ONCOLL SLIP
Branch: BATANGAS - TANAUAN
Account Name: DMMC INSTITUTE OF HEALTH SCIENCES INC - NSC - SOUTHERN LUZON
Account Number: 2952-2220-26

Prepared by:
Christian H. Magsino
Accounting Assistant

Checked by:
Rocel C. Festejo, CPA
Accountant

Noted by:
Angelita U. Vanguardia, RN, MAN
Program Manager

| SHIPPING DETAILS | |
|---|--|
| CARD SERIES | |
| PACKAGE TRACKING# | |
| SHIP VIA | |
| SHIP DATE | |
| CUSTOMER SIGNATURE OVER PRINTED NAME | |
| DATE RECEIVED | |

TERMS AND CONDITIONS

We/I hereby agree to pay the above amount at the date and for the terms specified. In case of default at the time of payment, **we/I agree to pay interest at the rate of 2% per month from due date**, and in case of suit for the collection of the amount, we/I hereby agree to pay 2% of the amount due and for attorney's fees and cost of collection and that the suit shall be instituted in Batangas, Philippines

NOTE: The NSF personnel in charge of receiving the order supplies must immediately inform Newborn Screening Center - Southern Luzon of any discrepancy in the delivery within the day the order was received. If we do not receive any call or complaint from your health facility regarding your order, it shall be deemed received in good order and condition.