



PASIG DOCTORS MEDICAL CENTER, INC.  
254 AMANG RODRIGUEZ AVE. MANGGAHAN PASIG CITY

CHECK VOUCHER

NO. 15780

P 28,216.31

PAY TO: AXIBAL, MAXIMO B. JR	VOUCHER DATE 6/2/2025
ADDRESS	CHECK NO: 898961
	BANK: Security Bank
	CHECK DATE 6/2/2025

Particulars: PROFESSIONAL FEE - CLINICAL PATHOLOGY APRIL 2025 (S)

ACCOUNT TITLE	DEBIT	CREDIT
PROFESSIONAL FEE EXPENSES - READERS FEE - LABORATORY	31,351.46	0
WITHHOLDING TAX EXPANDED - 10%	0.00	3,135
CASH IN BANK - SECURITY BANK	0.00	28,216
<b>TOTAL :</b>	<b>31,351.46</b>	<b>31,351.</b>

PREPARED BY:	COSTALES, ELDSON JAE ALUDO	APPROVED BY:	
REVIEWED & APPROVED BY	Mary Cris R. Baliton	Herminio A. Hernandez, MD	Ma. Mayumi B. Gillana, MD
		Chairman of the Board	President
NOTED BY:	Virginia P. Go, MD	Aylmer F. España, MD	Virginia P. Go, MD
AUDITED BY:		Treasurer	Assistant Treasurer

This is to acknowledge receipt of:

P 28,216.31 Twenty-Eight Thousand Two Hundred Sixteen and 31/100 only

Payment receive by (Name)	Signature
	Date Received



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254 AMANG RODRIGUEZ AVE. MANGGAHAN PASIG CITY

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VOUCHERS PAYABLE							
APV No.	Confinement Date	Patients	GrossPF	EWTax	Net Amount	Guarantor	

TOTAL



PASIG DOCTORS MEDICAL CENTER, INC.  
254 AMANG RODRIGUEZ AVE. MANGGAHAN PASIG CITY

CHECK VOUCHER

NO. 15779

P

52,401.71

PAY TO: PADUA JR., ROBERTO D.	VOUCHER DATE 6/2/2025
ADDRESS	CHECK NO: 898960
	BANK: Security Bank
	CHECK DATE 6/2/2025

Particulars: PROFESSIONAL FEE - CLINICAL PATHOLOGY APRIL 2025 (S)

ACCOUNT TITLE	DEBIT	CREDIT
PROFESSIONAL FEE EXPENSES - READERS FEE - LABORATORY	58,224.12	0
WITHHOLDING TAX EXPANDED - 10%	0.00	5,822
CASH IN BANK - SECURITY BANK	0.00	52,401
<b>TOTAL :</b>	<b>58,224.12</b>	<b>58,224.</b>

PREPARED BY:	COSTALES, ELDSON JAE ALUDO	APPROVED BY:		
REVIEWED & APPROVED BY	Mary Cris R. Baliton	Herminio A. Hernandez, MD	Ma. Mayumi B. Gillana, MD	
		Chairman of the Board	President	
NOTED BY:	Virginia P. Go, MD	Aylmer F. España, MD	Virginia P. Go, MD	
AUDITED BY:		Treasurer	Assistant Treasurer	

This is to acknowledge receipt of:

P 52,401.71 Fifty-Two Thousand Four Hundred One and 71/100 only

Payment receive by (Name)	Signature
	Date Received



PASIG DOCTORS MEDICAL CENTER, INC.  
254 AMANG RODRIGUEZ AVE. MANGGAHAN PASIG CITY

CHECK VOUCHER

NO. 15779

P

52,401.71

VOUCHERS PAYABLE

APV No.	Confinement Date	Patients	GrossPF	EWTax	Net Amount	Guarantor
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TOTAL