

040

ACCOUNT No.

007-650-02879-8
007-650-02879-8

ACCOUNT NAME

007-650-02879-8
007-650-02879-8



CHECK No.

6500187351
6500187351

BRSTN

38026
0023

DATE

February 16, 2021

P

22,000.00

PAY TO THE
ORDER OF

ANALYN PURIO

PESOS

TWENTY TWO THOUSAND PESOS ONLY

I / We allow the electronic clearing of this check and hereby waive the presentation for payment of this original to Metrobank

DOCUMENTARY STAMPS PAID



ORIENTAL MINDORO-PINAMALAYAN BRANCH
MABINI ST. PINAMALAYAN OR. MIN.

ENRICO BRIAN ANI

ANALYN PURIO

6500187351380260023007650028798650018735138026002300765002879865001873513802600230076500287

6500187351380260023007650028798000

2/16/2021

Maria Estrella General Hospital, Inc.

**PHP 22,000.00

Twenty-Two Thousand and 00/100*****

Engr.Avelino Latoza,Maxwell Metrio, Reymark Laylay

Maria Estrella General Hospital, Inc.

2/16/2021

E600 · OPEX Misc.:E610 · OPEX Misc-ot Engr.Avelino Latoza,Maxwell Metrio, Reymark Laylay

PHP 22,000.00

Metrobank - Site 2879 Engr.Avelino Latoza,Maxwell Metrio, Reymark L

PHP 22,000.00

Maria Estrella General Hospital, Inc.

2/16/2021

E600 · OPEX Misc.:E610 · OPEX Misc-ot Engr.Avelino Latoza,Maxwell Metrio, Reymark Laylay

PHP 22,000.00

Metrobank - Site 2879 Engr.Avelino Latoza,Maxwell Metrio, Reymark L

PHP 22,000.00

MINDORO HARVEST ENERGY CO. INC
REQUEST FOR DISBURSEMENT

SENDER : MHEC
 PAY TO : _____

RFCD No. : _____
 Date Requested: FEB 16 2021
 Due Date : FEB 16, 2021

Cash

Bank Check

SWAB TESTING FOR 4 PERSON @ 5,500 EACH

- JANSON BUMAGAT
- REYMARK LAYLAY
- MAXWELL METRIO
- AVELINO LATOZA

22,000.00

22,000.00

Prepared by:

[Signature]
 MELME MORALES

Checked by:

[Signature]
 VEVERLY RAMOS

Noted by:

[Signature]
 MARIETTA CELIS

Recommending

[Signature]
 Approval: 02/16/21 05:10 PM
 JOY NAJITO

Request Initiated by:

Payment Received by:

MARIA ESTRELLA GENERAL HOSPITAL, INC.

Tawiran, Calapan City, Oriental Mindoro
VAT Reg. TIN: 006-091-728-000

OFFICIAL RECEIPT

Received from: MINDORO HARVEST ENERGY CO., INC. Date: 02/17/2021

TIN: 008-929-767 OSCA/PWD ID No. 4/A

Address: HEMUSLOT, PINAMALAYAN, ORIENTAL MINDORO OSCA/PWD Signature

Bus. Style: 4/A

Hospital Bill COVID-19 SWAB TEST # 4 22,000.00

Reader Fee

Dr.

Dr.

Professional Fee

Dr.

Dr.

Dr.

Dr.

PAID

Less: Partial Payments

VATABLE SALES		Total Sales (VAT Inclusive)	<u>22,000.00</u>
VAT EXEMPT SALES		Less: VAT	
ZERO RATED SALES		Amount Net of VAT	<u>1</u>
VAT Amount		Less: SC/PWD Discount	
		TOTAL AMOUNT DUE	<u>22,000.00</u>

Mode of Payment:
Cash:
Check:
Check No.:


Billing Invoice No.	Amount
Total Sales	
Less: SC/PWD Discount	
Total Due	
Less: Withholding Tax	
Total Payment Due	<u>22,000.00</u>

1000 BkIts. (3X) 407501-457500
BIR Authority to Print No. 1AU0002206885
Date Issued: 07-20-20 Valid until: 07-20-25

 **BALIDAY ENTERPRISES**
534 Karilagan St., Camilmil, Calapan City
Oriental Mindoro Tel. No. 288-7708
TIN: 295-605-781-000 NV

Printer's Accreditation No. 063MP202000000000010
Date Issued: 05-22-2020

THIS OFFICIAL RECEIPT SHALL BE VALID UP TO JULY 20, 2025


Cashier/Authorized Representative

Nº 410890

MARIA ESTRELLA GENERAL HOSPITAL, INC.TAWIRAN, CALAPAN CITY
VAT REG. TIN: 006-091-728-000**JOB ORDER****Laboratory**

Case No. : 436604
Name : LATOZA, AVELINO BONITO JR
Address : STA. RITA PINAMALAYAN OR. MDO.
Date : 02/17/2021 Doc. No. : CA 186284
HMO : Room No. :
OSCAID

Description	Qty	Price	RF	Amount
SWAB TEST	1	5,500.00	0.00	5,500.00
TOTAL AMT.				5,500.00
Vat				0.00
SC/OTHER DISC.				0.00
GRAND TOTAL				5,500.00

MARIA ESTRELLA GENERAL HOSPITAL, INC.TAWIRAN, CALAPAN CITY
VAT REG. TIN: 006-091-728-000**JOB ORDER****Laboratory**

Case No. : 436605
Patient Name : METRIO, MAXWELL DEO BALAIBO
Address : Pachoca Calapan City Oriental Mindoro
Date : 02/17/2021 Doc. No. : CA 186285
HMO : Room No. :
OSCAID

Description	Qty	Price	RF	Amount
SWAB TEST	1	5,500.00	0.00	5,500.00
TOTAL AMT.				5,500.00
Vat				0.00
SC/OTHER DISC.				0.00
GRAND TOTAL				5,500.00

1000 Bkts. (3X) 150001-200000
BIR Authority to Print No. 1AU0002206885
Date Issued: 07-20-20 Valid until: 07-20-25

BALIDAY ENTERPRISES
534 Karilagan St., Camilmil, Calapan City, Or. Mindoro
Tel. No. 288-7708 TIN: 295-605-791-000 NV

THIS JOB ORDER SHALL BE VALID UP TO JULY 20, 2025

Authorized Representative

Printer's Accreditation No. 063MP202000000000010
Date Issued: 05-22-2020

Nº 154119

1000 Bkts. (3X) 150001-200000
BIR Authority to Print No. 1AU0002206885
Date Issued: 07-20-20 Valid until: 07-20-25

BALIDAY ENTERPRISES
534 Karilagan St., Camilmil, Calapan City, Or. Mindoro
Tel. No. 288-7708 TIN: 295-605-781-000 NV

THIS JOB ORDER SHALL BE VALID UP TO JULY 20, 2025

Authorized Representative

Printer's Accreditation No. 063MP202000000000010
Date Issued: 05-22-2020

Nº 154118

MARIA ESTRELLA GENERAL HOSPITAL, INC.TAWIRAN, CALAPAN CITY
VAT REG. TIN: 006-091-728-000**JOB ORDER**

Laboratory

Job Order No. : 436600

Patient Name : LAYLAY, REYMARK -

Address : Sta. Maria Village Calapan City Oriental Mindoro

Date : 02/17/2021

Doc. No. : CA 186282

HMO :

Room No. :

OSCAID

Description	Qty	Price	RF	Amount
19 SWAB TEST	1	5,500.00	0.00	5,500.00
TOTAL AMT.				5,500.00
Vat				0.00
SC/OTHER DISC.				0.00
GRAND TOTAL				5,500.00

Paid
pr1000 Bkts. (3X) 150001-200000
BIR Authority to Print No. 1AU0002206885
Date Issued: 07-20-20 Valid until: 07-20-25**BALIDAY ENTERPRISES**534 Karilagan St., Camilmil, Calapan City, Or. Mindoro
Tel. No. 288-7708 TIN: 295-605-781-000 NV

THIS JOB ORDER SHALL BE VALID UP TO JULY 20, 2025

Authorized Representative
Printer's Accreditation No. 063MP202000000000010
Date Issued: 05-22-2020

N9 154115

MARIA ESTRELLA GENERAL HOSPITAL, INC.TAWIRAN, CALAPAN CITY
VAT REG. TIN: 006-091-728-000**JOB ORDER**

Laboratory

Job Order No. : 436603

Patient Name : BUMAGAT, JANSON BINGAYAN

Address : STA RITA PINAMALAYAN OR. MDG.

Date : 02/17/2021

Doc. No. : CA 186283

HMO :

Room No. :

OSCAID

Description	Qty	Price	RF	Amount
19 SWAB TEST	1	5,500.00	0.00	5,500.00
TOTAL AMT.				5,500.00
Vat				0.00
SC/OTHER DISC.				0.00
GRAND TOTAL				5,500.00

Paid
pr1000 Bkts. (3X) 150001-200000
BIR Authority to Print No. 1AU0002206885
Date Issued: 07-20-20 Valid until: 07-20-25**BALIDAY ENTERPRISES**534 Karilagan St., Camilmil, Calapan City, Or. Mindoro
Tel No 288-7708 TIN: 295-605-781-000 NV

THIS JOB ORDER SHALL BE VALID UP TO JULY 20, 2025

Authorized Representative
Printer's Accreditation No. 063MP202000000000010
Date Issued: 05-22-2020

N9 154120