



7-Apr-2025

METROPOLITAN MEDICAL CENTER
ATTN: MS. KAT/TERESA
1357 G. MASANGKAY ST., TONDO MANILA CITY
TEL: 0956-3453958

Sir/ Madam,

This is to bill you on the service job done to your unit for the month of JANUARY 2025.
Details of the charges are stated below and a copy of the Service Job Report is attached for your references:

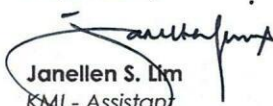
DATE ATTENDED	SJR #	QUANTITY/MODEL	SERVICE JOB DONE	LOCATION	AMOUNT
24-Jan-25	HO-00239137	(1) KSM-IW20-WCT10M1M32	INSTALLATION	DRA. SAN JUAN / 13TH FLR	27,150.00
30-Jan-25	HO-00239135	(1) KSG-IWF-30WFY-8K1M32	INSTALLATION	RADIOLOGY	21,900.00
TOTAL AMOUNT DUE					P 49,050.00

For any clarifications please feel free to call the Undersigned at the telephone number **8852-6473**

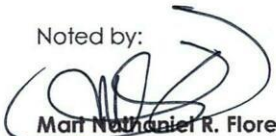
Note: If check payment, please prepare check payable to **Kolin Philippines International Inc.**
Account #: BDO - KALAYAAN 011808000428

Note: In case thru Bank Deposit under BDO Account, kindly indicate SJR# for your Bank Reference in the deposit slip and Fax to **(632) 8852-6473** or E-mail to: **kmi_asst@kolinphil.com.ph**

Prepared by:


Janellen S. Lim
KMI - Assistant

Noted by:


Mar Nathaniel R. Flores
KMI - Supervisor

Received by:

Signature over printed name

 **Kolin Philippines Int'l., Inc.**

Plant and Head Office:
Blk 3 Lt 5 Main Drive, FCIE Compound,
Brgy. Langkaan I, Dasmariñas, Cavite
Tel: (632) 8749-2118
Fax (046) 402-0793
www.kolinphil.com.ph / kolinphilippines

Operation Office:
1854 Sta. Rita St., Guadalupe Nuevo,
Makati City
Tel: (632) 8851-2711, 12 or 15
Fax: (632) 8852-2170
Sales Dept. Fax: (632) 8852-4791





1854 Sta. Rita St., Guadalupe Nuevo, Makati City
Tel. No.: 8852-6868 / Mobile: 0917-811-8982 / Email: service@kolinphil.com.ph
Website: www.kolinphil.com.ph [kolinphilippines](https://www.youtube.com/kolinphilippines)

SERVICE JOB REPORT

No.	HO-00239137
Previous SJR No.	HO-00234675

[illegible]



SERVICE JOB REPORT

HO-00239135

HO-00234675

[illegible]

KOLIN PHILS. INT'L. INC.
STATEMENT OF ACCOUNT / SUMMARY CLAIMS

ASC NAME:	RKH AIRCONDITIONING SERVICES
SOA #	
PERIOD COVER:	JAN 24 2025 – JAN 30 2025
DATE SUBMITTED:	02/06/2025

NO.	SJR No.	Customer Name	Customer Address	Contact No.	Model	DOP	Serial Indoor	Serial Outdoor	Dealer	Date Attended	Date Finished	Job done	PRICE	Other Remarks
1	HO-00239137	METROPOLITAN MEDICAL CENTER	1357 G MASANGKAY ST.TONDO MANILA CITY	9563453958	KSM-IW20-WCT10M1M32	C/O KMI	18652404-16012	18662404-14676	KMI	01/24/25	01/24/25	INSTALLATION OF INDOOR & OUTDOOR UNIT,LAY	27,150.00	
2	HO-00239135	METROPOLITAN MEDICAL CENTER	1357 G MASANGKAY ST.TONDO MANILA CITY	9563453958	KSG-IWF-30WFY-8K1M32	C/O KMI	18512404-17186	18522404-17310	KMI	01/30/25	01/30/25	INSTALLATION OF INDOOR & OUTDOOR UNIT,LAY	21,900.00	
TOTAL													49,050	

GUIDELINES:

1. Fill Up all the details above properly.
2. Size of SOA must be printed in Long/Legal size attached to Folder with fastener.
3. All jobs with borrowed parts are subject to liquidation prior to claiming.
4. If the date installation is more than a month, input the reason in column of other remarks.

PREPARED BY: CATHERINE HERNANDEZ