

METROPOLITAN MEDICAL CENTER

ATTN: MS. KAT/TERESA

1357 G. MASANGKAY ST., TONDO MANILA CITY

TEL: 0956-3453958

Sir/ Madam,

This is to remind you of your unsettled bill for the service job done to your unit for the month of JUNE 2024. 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
06-Jun-24	HO-00206622	(1) KSM-IW20-WCT10M1M32	INSTALLATION	PHARMACY AREA	28,350.00
TOTAL AMOUNT DUE				P_	28,350.00

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. him KMI - Assistan

Received by:

Signature over printed name

KMI - Supervisor



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









April 03, 2025

METROPOLITAN MEDICAL CENTER C/O KOLIN

1357-G Masangkay St Brgy 262 Tondo Manila

Subject: For the collection that we made upon the service of your air-conditioning units. (PHARMACY AREA)

Dear Sir/Madam:

We would like to present the billing regarding to the service done indicated below.

Date	Service Call Report#	Brand/ Model	Service done	Service by:	Pricelist
06-06-2024	75961	1 Kolin wall mounted type (KSM-IW20-WCT- 10M1M32	Installation of brand new unit	Alberto/Joven/ Jaypaul	28,350
TOTAL					28,350

"Job completed and tested ok"

Yours truly,	CONFORMED BY:	
The same of the sa		
BENEDICT SAGUN		
Customer Service Asst.		

Kolin Philippines Int'l., Inc. SERVICE JOB REPORT 1854 Sta. Rita St., Guadalupe Nuevo, Makati City Tel. No.: 8852-6868 / Mobile: 0917-811-8982 / Email: service@......nphil.com.ph Website: www.kolinphil.com.ph HO-00206622 HQ-00190620 Previous SJR No. Customer Metropolitan Medical Center Date 08-05-2024 , 1357-G. Masangkay St., , Brgy. Tondo, MANILA CITY, Metro Manila Address Start Time 09:09 am **End Time** 09:11 am Telephone No. 0977-8029411 Mobile No. Janellen- KMI Relayed by Ms. Kat Contact Person Mobile No. 0977-8029411 Tel. No. C Warranty Type Warranty Code Room Size 1 Job Class INST LVL KSM-IW20-WCT10M1M32 Model Ю Call Origin FD Job Type S/N (I) S/N (O) 18652401-14287 18602401-1400 Permit? Parking? Appointment? O.R.? Ladder? Dealer 05/27/2024 DOP Notes Reyaire survey ref number HO-00205508 FOR INSTALLATION DOP: 05/27/2024 EDD: 05/29/2024 Installer For Installation Complaint -unit delivered already ECY Referral KINDLY ADVISE CLIENT AHEAD OF TIME Location Pharmacy Area Before After Mode Setting (Cool) No. of Visit 1st Action Tentative Sched 06/07/2024 WAC | Setting Temp(16°C-RE)/(10/12-ME) **Findings** SAC/PAC | Setting Temp (17°) Discharge Temperature (High) Intake Temperature (High) Ampere Recommendation Wattage (Inverter) Voltage SAC/PAC | Pressure (PSI) Part Code Description Qty **Unit Price** Amount No: 2024-05-35-6 . 0 SR No. F 800:00 Labor Findings - Installation, , , Recommendation - For installation of 2hp aircon, , , Rep Complete installation of indoor and outdoor unit. Handling Repair Done Others SAC18-2 - Installation - 1.0HP - 2.0HP Inverter and Non- inverter (includes 10ft. coppertube, Repair Code 61 K 1403bi 10.9.24 10 ft. royal cord, rubber insulation, ordinary bracket, drainhose / PVC drain pipe 3/4) 06/06/2024 Date Finis06/06/2024 **Date Attended** Amount Paid Time Attended 12:00 am Time Finish2000 am Ralance

Check No.

Conformed by:

By signing below, I authorize or give consent to Kolin Philippines International, Inc. and its ASC to collect, store and process my personal information for availing service as required by Data Privacy Act of 2012 and other applicable laws and regulations.

I hereby agree to the above repair charges incurred/to be incurred to my unit and to the terms and conditions stated at the back, and that I received the unit in good working condition.

Bank / Branch

Customer

(Signature over printed name)

This serves as temporary receipt when properly filled up by authorized representative.

Created by:

KATHY DE GUZMAN

CSR

Reyaire

Technician(s)

Serviced by: