

ACEBEDO OPTICAL
FREE EYE CHECK-UP

JOYO Gaming HUB

RIGHT EYE:

LEFT EYE:

Polyclinics & Diagnostic Center, Inc.
 Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
 2273/266-3245
 alpha.ph

SERVICE ORDER



Priority No.	0002
SO No.	462304
S.O Date	05/14/2024
Terms	30 Days
Amount Due	P800.00

SOLUTIONS
 Cebu PHILIPPINES 6000, Cebu City (Capital), Cebu



PATIENT INFORMATION

PATIENT ID : 100199
PATIENT NAME : SILVA, MARGARITA, CANE
PATIENT ADDRESS : Dumlog, City Of Talisay, Cebu
MOBILE NO. : 0916 278 0846
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Female
BIRTHDATE : 11/12/2000
AGE : 23
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

PRIME CARE
ALPHA

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME	1.00	800.00	800.00

SUMMARY OF CHARGES	
TOTAL SALES	800.00
VARIABLE SALES	0.00
V-A-T	0.00
SC/PWD DISCOUNT	0.00
AMOUNT DUE	800.00

»PE, CHEST PA, CBC, UA, SE
 DRUG TEST (NOTE: PLEASE COMPLY ALL
 THE FOLLOWING TEST WITHIN THIS DAY OTHERWISE YOU
 WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT
 AVAILMENT.)

BIOMETRICS DONE
DATE: 5/14/24

PREPARED BY: Arissa Marie L. Armenion	ACKNOWLEDGED BY: Signature Over Printed Name	VALIDATED BY: Signature Over Printed Name
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Page 1 of 1 I acknowledge that I was duly informed by Prime Care Alpha employee to pay the above mentioned tests. I have reviewed the prices listed on the (SO) and agree to the changes associated with the products and services. Date Created: 05/14/2024 07:14 AM

*** THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM ***



OFFICE OF THE PUNONG BARANGAY

CERTIFICATION

To Whom It May Concern:

This is to certify that **Mr./Ms./Mrs. Margarita C. Silva**,
23 yrs. old whose signature and thumbmark appear below, is a bona fide
 resident of Zone-1 404 Ramona Village, Barangay
 Dumlog, City of Talisay, Cebu.

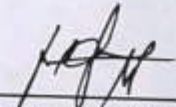
This certification is being issued upon the request of **Mr./Ms./Mrs. Margarita C. Silva**
 in connection with his/her application for
LOCAL EMPLOYMENT or for whatever legal purpose this may serve best.

Issued this 13th day of May, 2024.


 Signature of applicant



Right thumbmark


Hon. Nelson A. Abellana
 Punong Barangay

OR No. : _____

CTC No. : _____

Issued at: _____

Issued on: _____

NOT VALID WITHOUT THE OFFICIAL SEAL
 Note: Valid only for six (6) months