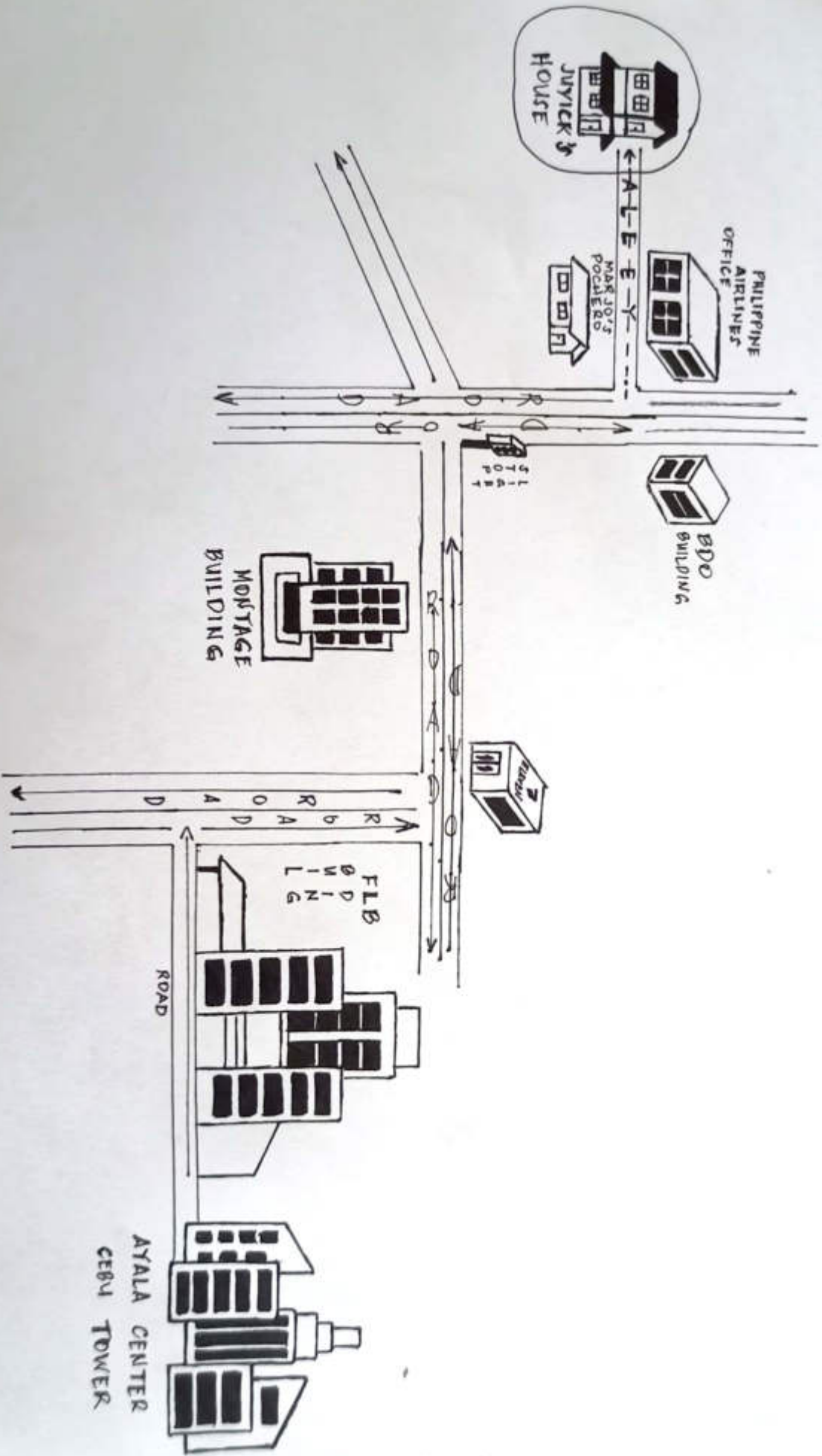


JUVICK TALARA'S SKETCH OF RESIDENCE



2024/06/06 10:01

ACEBEDO OPTICAL
FREE EYE CHECK-UP

Polyclinics & Diagnostic Center, Inc.
M Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
2-2273/266-3245
realpha.ph

SERVICE ORDER



RIGHT EYE: 20/20 20/20 20/20
LEFT EYE: 20/20 20/20 20/20

IPLOY STAFFING SOLUTIONS
SUITE 6000, Cebu City (Capital), Cebu

Priority No.	0036
SO No.	464013
S.O Date	06/03/2024
Terms	30 Days
Amount Due	P800.00

PATIENT INFORMATION

PATIENT ID : 100955
PATIENT NAME : TALARA, JUVICK, CETENTA
PATIENT ADDRESS : Camputhaw (Pob.), Cebu City (Capital), Cebu
MOBILE NO. : 0976 075 1466
EMAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
RESULT DELIVERY : DELIVERY

GENDER : Male
BIRTHDATE : 04/08/1994
AGE : 30
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT



CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME »PE, CHEST PA, CBC, UA, SE, W, DRUG TEST (NOTE: PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	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

PRIME CARE
BIOMETRICS DONE
DATE: JUN 03 2024

PREPARED BY: Arisa Marie L. Armenlon	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: 06/03/2024 09:47 AM

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