

**ACEBEDO OPTICAL
FREE EYE CHECK-UP**

RIGHT EYE:
LEFT EYE:

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

SERVICE ORDER



Priority No.	0002
SO No.	465283
S.O Date	06/18/2024
Terms	30 Days
Amount Due	P800.00

SOLUTIONS
6000, Cebu City (Capital), Cebu



PATIENT INFORMATION

PATIENT ID : 101488
 PATIENT NAME : NAVARES, FRITZ EZER, QUIEL
 PATIENT ADDRESS : Tisa, Cebu City (Capital), Cebu
 MOBILE NO. : 0997 079 8220
 EMAIL ADDRESS :
 REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY

GENDER : Male
 BIRTHDATE : 06/05/1992
 AGE : 32
 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 *PE, CHEST RA, CBC, UA, SE, <i> waived</i> 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

BIOMETRICS DONE
DATE: **JUN 18 2024**

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

PREPARED BY:

Arissa Marie L. Armenion

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

BY: *[Signature]*
Signature Over Printed Name

Date Created: 06/18/2024 07:09 AM

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.

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