

FREE EYE CHECK-UP

Beside Cashier Counter

RIGHT EYE:

LEFT EYE:

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

SERVICE ORDER



IPLOY STAFFING SOLUTIONS

16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City
(Capital), Cebu
09177097074 / 09171575430

~~WHENEVER PLEASE
DATE SCHEDULED
OTHERWISE YOU WILL
PAY P~~

| | |
|--------------|------------|
| Priority No. | 0016 |
| No. | 472102 |
| Date | 08/27/2024 |
| Terms | 30 Days |
| Amount Due | P800.00 |

PATIENT INFORMATION

PATIENT ID : 104682
 PATIENT NAME : ABENDAN, ANGELIKA, BROÑIOLA
 PATIENT ADDRESS : Sambag II (Pob.), Cebu City (Capital), Cebu
 MOBILE NO. : 0915 199 6694
 EMAIL ADDRESS :
 REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY

GENDER : Female
 BIRTHDATE : 12/17/2001
 AGE : 22
 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, CRC, UN 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 |

PREPARED BY:

Arissa Marie L. Armenion

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

BY:

Signature Over Printed Name

Date Created: 08/27/2024 07:49 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 ****