

SERVICE ORDER



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

FREE EYE CHECK-UP

Beside Cashier Counter

RIGHT EYE: *20/25*
 LEFT EYE: *20/25*

Priority No.	0228
SO No.	475131
S.O Date	09/30/2024
Terms	30 Days
Amount Due.	P800.00

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

PATIENT INFORMATION

PATIENT ID : 106095
 PATIENT NAME : OLORES, RICO, MATIDIOS
 PATIENT ADDRESS : Pilipog, Cordova, Cebu
 MOBILE NO. : 0931 143 1916
 EMAIL ADDRESS :
 REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY

GENDER : Male
 BIRTHDATE : 05/22/2001
 AGE : 23
 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, <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

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]*
 Signature Over Printed Name

VALIDATED

Signature Over Printed Name

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 ***