

FREE EYE CHECK-UP

Beside Cashier Counter

RIGHT EYE: 20/25

LEFT EYE: 20/25

Polyclinics & Diagnostic Center, Inc.
4 Centrale, A. Soriano Jr. Ave., NRA, Mabojo, Cebu City
02-2273/266-3245
palpha.ph

SERVICE ORDER



Priority No.	0147
SO No.	480101
S.O Date	11/18/2024
Terms	30 Days
Amount Due	P800.00

(000160) IPLOY STAFFING SOLUTIONS
16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City
(Capital), Cebu
09177097074 / 09171575430

PATIENT INFORMATION

PATIENT ID : 110686
 PATIENT NAME : LAUDERES, ROCEL MAY, PERUDA
 PATIENT ADDRESS : Guadalupe, Cebu City (Capital), Cebu
 MOBILE NO. : 0927 327 1335
 EMAIL ADDRESS :
 REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY

GENDER : Female
 BIRTHDATE : 05/24/2002
 AGE : 22
 CIVIL STATUS : Single
 SC/PWD ID :
 HMO CARD NO. :
 PATIENT STATUS : FOR EMPLOYMENT

PRIME CARE

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PERM +PAIN CHEST PAIN CBC HUA 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	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]

Date Created: 11/18/2024 02:34 PM

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 (ISO) and agree to the changes associated with the products and services.

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