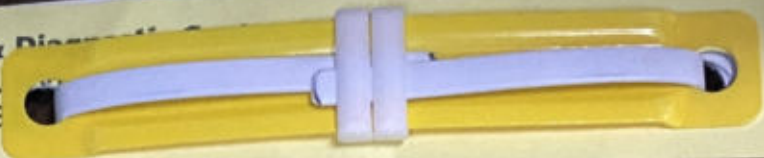


**FREE EYE CHECK-UP**

Polyclinics & Diagnostic  
Centrale, A.  
-2273/266-3  
alpha.ph

**SERVICE ORDER**



Beside Cashier Counter

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

Priority No.	0045
SO No.	479976
S.O Date	11/18/2024
Terms	30 Days
Amount Due	P800.00

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

**PATIENT INFORMATION**

**PATIENT ID** : 110617  
**PATIENT NAME** : LOZADA, CRISPIN, SANGHILAN, JR.  
**PATIENT ADDRESS** : Lahug (Pob.), Cebu City (Capital), Cebu  
**MOBILE NO.** : 0946 373 2051  
**EMAIL ADDRESS** :  
**REQUESTING PHYSICIAN** :  
**COMPANY/REFERRED BY** : IPLOY STAFFING SOLUTIONS  
**RESULT DELIVERY** : DELIVERY

**GENDER** : Male  
**BIRTHDATE** : 12/04/1999  
**AGE** : 24  
**CIVIL STATUS** : Single  
**SC/PWD ID** :  
**HMO CARD NO.** :  
**PATIENT STATUS** : FOR EMPLOYMENT



CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPL OPTIC »PEL, CHEST PA, CBC, UA 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
VATABLE 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**

Signature Over Printed Name

I acknowledge that I was duly informed by Prime Cafe 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 \*\*\*