

**FREE EYE CHECK-UP**

Beside Cashier Counter

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

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

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

**SERVICE ORDER**

Priority No.	0047
SO No.	479979
S.O Date	11/18/2024
Terms	30 Days
Amount Due	₹800.00

**PATIENT INFORMATION**

**PATIENT ID** : 110618  
**PATIENT NAME** : ORA, MARIA FE, POGOY  
**PATIENT ADDRESS** : Canduman, Mandaue City, Cebu  
**MOBILE NO.** : 0948 106 5559  
**EMAIL ADDRESS** :  
**REQUESTING PHYSICIAN** :  
**COMPANY/REFERRED BY** : IPLOY STAFFING SOLUTIONS  
**RESULT DELIVERY** : DELIVERY

**GENDER** : Female  
**BIRTHDATE** : 08/10/2002  
**AGE** : 22  
**CIVIL STATUS** : Single  
**SC/PWD ID** :  
**HMO CARD NO.** :  
**PATIENT STATUS** : FOR EMPLOYMENT

**CODE** : P127  
**PARTICULARS/PROCEDURE** : IPLOY PEME  
**QTY** : 1.00  
**UNIT PRICE** : 800.00  
**AMOUNT** : 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. Armenton

*Arissa Marie L. Armenton*  
Signature Over Printed Name

**ACKNOWLEDGED BY:**

*[Signature]*  
Signature Over Printed Name

**VALIDATED**

Signature Over Printed Name

Date Created: 11/18/2024 10:04 AM

I acknowledge that I was duly informed by Prime Care Alpha employee to pay the above mentioned texts. I have reviewed the prices listed on the (EOD) and agree to the charges associated with the products and services.

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