

**FREE EYE CHECK-UP**

Beside Cashier Counter

RIGHT EYE: 20/25  
LEFT EYE: 20/24

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

**SERVICE ORDER**



Priority No.	0111
SO No.	480058
S.O Date	11/18/2024
Terms	30 Days
Amount Due	P800.00

**[000180] IPLOY STAFFING SOLUTIONS**  
16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City  
(Capital), Cebu  
09177097074 / 09171575430

**PATIENT INFORMATION**

PATIENT ID : 110665  
PATIENT NAME : APOLINAR, JEJOMAR, FABRICANTE  
PATIENT ADDRESS : Basak Pardo, Cebu City (Capital), Cebu  
MOBILE NO. : 0938 800 2365  
EMAIL ADDRESS :  
REQUESTING PHYSICIAN :  
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS  
RESULT DELIVERY : DELIVERY

GENDER : Male  
BIRTHDATE : 05/04/2000  
AGE : 24  
CIVIL STATUS : Single  
SC/PWD ID :  
HMO CARD NO. :  
PATIENT STATUS : FOR EMPLOYMENT



CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	CARE AMOUNT
P127	IPLOY PEME +PE (U), CHEST PA, UA, SE 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:

*[Handwritten Signature]*  
Signature Over Printed Name

VALIDATED BY:

*[Handwritten Signature]*  
Signature Over Printed Name