

FREE EYE CHECK-UP

Beside Cashier Counter

RIGHT EYE: 4/20
LEFT EYE: 4/20

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

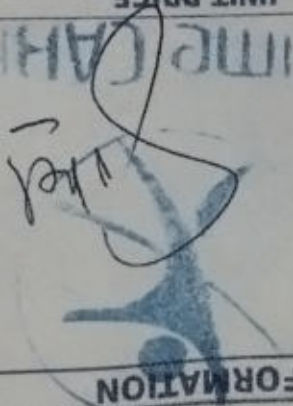
6th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu
Capital, Cebu
9177097074 / 09171575430

STAFFING SOLUTIONS

0077	Priority No.
487676	SO No.
01/27/2025	S.O Date
30 Days	Terms
P800.00	Amount Due

PATIENT INFORMATION

PATIENT ID : 117676
PATIENT NAME : GELBERO, JESSEL, ALBARANDO
PATIENT ADDRESS : Hipodromo, Cebu City (Capital), Cebu
MOBILE NO. : 0981 562 7841
MAIL ADDRESS :
REQUESTING PHYSICIAN :
COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
SULT DELIVERY : DELIVERY



GENDER : Female
BIRTHDATE : 06/10/2005
AGE : 19
CIVIL STATUS : Single
SC/PWD ID :
HMO CARD NO. :
PATIENT STATUS : FOR EMPLOYMENT

AMOUNT	QTY	UNIT PRICE	AMOUNT
800.00	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

SUMMARY OF CHARGES

PARTICULARS/PROCEDURE : PLOY PEME *PE, CHEST PA, CBC, UA, SE
DRUG TEST :
THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)

PREPARED BY:

Arissa Marie L. Armenion

ACKNOWLEDGED BY:

Signature Over Printed Name

VALIDATED

BY:

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 charges associated with the products and services.
 ***** THIS DOCUMENT IS NOT VALID FOR INPUT TAX CLAIM *****

SERVICE ORDER

