FREE EYE
Beside Cashie
RIGHT EYE:
LEFT EYE:

...ruppe Polyclinics & Diagnostic Center, Inc.
...vel, APM Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
...32) 232-2273/266-3245
...mecarealpha.ph

SERVICE ORDER

Priority No.	**0032**
SO No.	**490291**
S.O Date	**02/17/2025**
Terms	**30 Days**
Amount Due	**₱800.00**

...NG SOLUTIONS
16th floor, One Montage, Archbishop Reyes Ave, Cebu City, Cebu, Cebu City (Capital), Cebu
09177097074 / 09171575430

PATIENT INFORMATION

PATIENT ID	: 065324	**GENDER**	: Female
PATIENT NAME	: BURO, IRENEME , MAQUE	**BIRTHDATE**	: 06/14/2004
PATIENT ADDRESS	: Inayawan, Cebu City (Capital), Cebu	**AGE**	: 20
MOBILE NO.	: 0999 570 9995	**CIVIL STATUS**	: Single
EMAIL ADDRESS	: .	**SC/PWD ID**	:
REQUESTING PHYSICIAN	:	**HMO CARD NO.**	:
COMPANY/REFERRED BY	: IPLOY STAFFING SOLUTIONS	**PATIENT STATUS**	: FOR EMPLOYMENT
RESULT DELIVERY	: DELIVERY		

CODE	PARTICULARS/PROCEDURE 3303	QTY	UNIT PRICE	AMOUNT
P127	IPLOY, IEME »PE N, CHEST PA A, CBC C, UA N, SE WAN 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

Prime CARE ALPHA

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

DLQ 2/17/25

ACKNOWLEDGED BY:
Signature Over Printed Name

VERIFIED BY:
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 changes associated with the products and services.

Date Created: 02/17/2025 09:49 AM

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