

FREE EYE CHECK-UP

Beside Cashier Counter

RIGHT EYE: *20/20*

LEFT EYE: *20/20*

Polyclinics & Diagnostic Center, Inc.
4 Centrale, A. Soriano Jr. Ave., NRA, Mabolo, Cebu City
02-2273/266-3245
realpha.ph

SERVICE ORDER

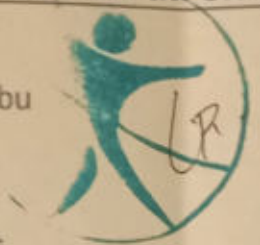


Priority No.	0025
SO No.	497915
S.O Date	05/05/2025
Terms	30 Days
Amount Due	P800.00

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

PATIENT INFORMATION

PATIENT ID : 124442
 PATIENT NAME : MARSONIA, MARLON,
 PATIENT ADDRESS : Labogon, Mandaue City, Cebu
 MOBILE NO. : 0965 944 8829
 EMAIL ADDRESS :
 REQUESTING PHYSICIAN :
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS
 RESULT DELIVERY : DELIVERY



GENDER : Male ✓
 BIRTHDATE : 03/23/2000
 AGE : 25
 CIVIL STATUS : Single
 SC/PWD ID :
 HMO CARD NO. :
 PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT
P127	IPLOY PEME	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

PRIME CARE
 BIOMETRICS DONE
 DATE: 05 MAY 2025

[Signature]
 CHEST PA, CBC, UA, SEW
 DRUG TEST (NOTE: PLEASE COMPLY ALL
 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]*

Date Created: 05/05/2025 09:20 AM

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.

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