

**FREE EYE CHECK-UP**

Beside Cashier Counter

RIGHT EYE:

LEFT EYE:

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

**SERVICE ORDER**



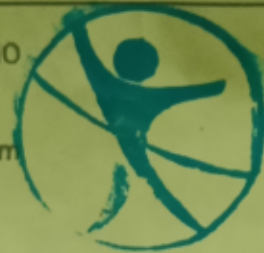
Priority No.	0112
SO No.	523706
S.O Date	02/09/2026
Terms	30 Days
Amount Due	₱800.00

**[000160] IPLOY STAFFING SOLUTIONS**

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

**PATIENT INFORMATION**

PATIENT ID : 147618  
 PATIENT NAME : SECUYA, LOUIE MAR, ANTONIO  
 PATIENT ADDRESS : Tipolo, Mandaue City, Cebu  
 MOBILE NO. : 0956 079 3961  
 EMAIL ADDRESS : louiemarsecuya04@gmail.com  
 REQUESTING PHYSICIAN :  
 COMPANY/REFERRED BY : IPLOY STAFFING SOLUTIONS  
 RESULT DELIVERY : DELIVERY



GENDER : Male  
 BIRTHDATE : 09/04/1999  
 AGE : 26  
 CIVIL STATUS : Single  
 SC/PWD ID :  
 HMO CARD NO. :  
 PATIENT STATUS : FOR EMPLOYMENT

CODE	PARTICULARS/PROCEDURE	QTY	UNIT PRICE	AMOUNT	SUMMARY OF CHARGES
P127	IPLOY PEME CHEST PAIN: CBC, UA, SE in DRUG TEST (NO FE PLEASE COMPLY ALL THE FOLLOWING TEST WITHIN THIS DAY, OTHERWISE YOU WILL PAY IT WITH YOUR OWN EXPENSE UPON NEXT AVAILMENT.)	1	800.00	800.00	TOTAL SALES : 800.00 VATABLE SALES : 0.00 V-A-T : 0.00 SC/PWD DISCOUNT : 0.00 AMOUNT DUE : 800.00

**Prime Care**  
 BIOMETRICS DONE  
 DATE: FEB 09 2026

PREPARED BY:

Juvelyn N Ursal

ACKNOWLEDGED BY:

Signature Over Printed Name

**VALIDATED**

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.