

ERNESTO O. UY, M.D. FPCP

INTERNAL MEDICINE - CARDIOLOGY

Hospital Address:

CARDINAL SANTOS MEDICAL CENTER

Room 140 Medical Arts Bldg.

Wilson St., Greenhills, San Juan, Metro Manila

Tel. No. 8727-0001 to 17 : 8727-0038 to 48 Loc. 2140

Mon. - Sat.: 9:00 - 12:00 nn

Patient:

April Grace - Giganti - Sangalang

Age/Gender:

Address:

Date:

06/20/2023

R

STANDARD CERTIFICATE

to whom it may concern:

*I have seen and examined patient
Mrs. April Grace Giganti - Sangalang
after physical examination and
review her laboratory result. Patient
is medically fit for work.*

*Respectfully,
Ernesto O. Uy, MD*

ERNESTO O. UY, MD

Lic. No.: 49041

PTR No.: _____

S2 No.: _____

Your follow up will be on: _____

IN PAYMENT OF THE FOLLOWING:	
PARTICULARS	AMOUNT
Total Sales(Vat Inclusive)	
Less: VAT	
Total Due	
Less: SC/PWD Discount	
Total Amount	
Less: Withholding Tax	
Amount Due	
Vatable Sales	
Vat Exempt Sales	
Zero Rated Sales	
VAT Amount	
Total Amount Due ₱	
PAYMENT IN FORM OF:	
Cash <input type="checkbox"/>	Check <input type="checkbox"/>
Others:	

ERNESTO O. UY, M.D.
 RM 140 MAB CARDINAL SANTOS MED, WILSON ST., GREENHILLS 1502
 CITY OF SAN JUAN NCR SECOND DISTRICT PHILIPPINES
 VAT REG TIN 104-019-254-00000

OFFICIAL RECEIPT

No. **2712**

Date: 6/20/23

Received from April Grace G. Sangalang
 with TIN _____ Bus. Style _____

Address _____
 the sum of pesos one thousand five hundred pesos
 (P. 1,500)

as partial/full payment for professional fee

SENIOR CITIZEN TIN	
OSCA/PWD ID No.	Signature

20 BkIts (50X2) 2501-3500
 BIR Authority to Print No.: 042AU2022000002391
 Date of ATP: 08-02-2022
 Non-Vat Reg. TIN: 186-177-049-00000
 JESSIE A. RESTAURO - Prop
 275-A Sto Rosario St., Plainview Mandaluyong city
 mobile: 0927.9343918

By: [Signature]
Cashier's Authorized Signature
Printer's Accreditation No.: 041MP2019000000011
 Date of Accreditation: Jan 25 2019