MEDICAL CERTIFICATE

11 0 /	2
This is to certify that Mr./Mrs. Medrano, John Paulo, Age_	
Sex Male, presently residing at no. 39 St. Pereguire Villa Egymgo has been consulted and managed at SANLUIZ MEDICAL CLINIC on July 101	tabelor Q.C
Sex hotex, presently residing across	
has been consulted and managed at SANLUIZ MEDICAL CLINIC on	1000
with Clinical Impression of Awte Upper Respiratory Injulion	(Resolved
	. 01
This certification is issued upon the request of Mr./Ms Medians , g	tha faul
For whatever Purposes it may serve Him/Her except for Medi	co Legal
case.	
Remarks:	
may resume bade to work.	
1 and	
Frances Radhelle M. Ordonez, M.	D
Lie No. D111227	
# 09(96+03)38	, MD.