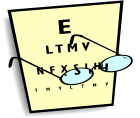




Patient Order Form

Email or Fax Prior to 2:00P.M. PST. For Next Day Delivery
Customer Service: (866)585-7666
Fax: (877)282-7666



Account #: _____

Ordered by: _____

Account Name: _____

PO# _____

Patient Name/Tray# _____

Sphere		Cylinder		Material		Color		Coating		Design	
OD:		<input type="checkbox"/>	CR-39	<input type="checkbox"/>	Polycarbonate	<input type="checkbox"/>	Sunmart-Gray AR (PY,1.67)	<input type="checkbox"/>	Non-Coated (CR-39)	<input type="checkbox"/>	Aspheric
		<input type="checkbox"/>	Trivex	<input type="checkbox"/>	Poly-EZ TINT	<input type="checkbox"/>	Transitions 8 AR (CR, PY)	<input type="checkbox"/>	Hard Coat		<input type="checkbox"/>
		<input type="checkbox"/>	1.60	<input type="checkbox"/>	Poly-EZ EDGE	<input type="checkbox"/>	Preguard (PY)	<input type="checkbox"/>	AR		
OS:		<input type="checkbox"/>	1.67					<input type="checkbox"/>	UltraClear AR		
		<input type="checkbox"/>	1.74					<input type="checkbox"/>	Blue Block AR (CR,Trivex, PY, 1.60, 1.67, 1.74)		

Patient Name/Tray# _____

Sphere		Cylinder		Material		Color		Coating		Design	
OD:		<input type="checkbox"/>	CR-39	<input type="checkbox"/>	Polycarbonate	<input type="checkbox"/>	Sunmart-Gray AR (PY,1.67)	<input type="checkbox"/>	Non-Coated (CR-39)	<input type="checkbox"/>	Aspheric
		<input type="checkbox"/>	Trivex	<input type="checkbox"/>	Poly-EZ TINT	<input type="checkbox"/>	Transitions 8 AR (CR, PY)	<input type="checkbox"/>	Hard Coat		<input type="checkbox"/>
		<input type="checkbox"/>	1.60	<input type="checkbox"/>	Poly-EZ EDGE			<input type="checkbox"/>	AR		
OS:		<input type="checkbox"/>	1.67					<input type="checkbox"/>	UltraClear AR		
		<input type="checkbox"/>	1.74					<input type="checkbox"/>	Blue Block AR (Trivex, PY, 1.60, 1.67, 1.74)		

Patient Name/Tray# _____

Sphere		Cylinder		Material		Color		Coating		Design	
OD:		<input type="checkbox"/>	CR-39	<input type="checkbox"/>	Polycarbonate	<input type="checkbox"/>	Sunmart-Gray AR (PY,1.67)	<input type="checkbox"/>	Non-Coated (CR-39)	<input type="checkbox"/>	Aspheric
		<input type="checkbox"/>	Trivex	<input type="checkbox"/>	Poly-EZ TINT	<input type="checkbox"/>	Transitions 8 AR (CR, PY)	<input type="checkbox"/>	Hard Coat		<input type="checkbox"/>
		<input type="checkbox"/>	1.60	<input type="checkbox"/>	Poly-EZ EDGE			<input type="checkbox"/>	AR		
OS:		<input type="checkbox"/>	1.67					<input type="checkbox"/>	UltraClear AR		
		<input type="checkbox"/>	1.74					<input type="checkbox"/>	Blue Block AR (Trivex, PY, 1.60, 1.67, 1.74)		

Patient Name/Tray# _____

Sphere		Cylinder		Material		Color		Coating		Design	
OD:		<input type="checkbox"/>	CR-39	<input type="checkbox"/>	Polycarbonate	<input type="checkbox"/>	Sunmart-Gray AR (PY,1.67)	<input type="checkbox"/>	Non-Coated (CR-39)	<input type="checkbox"/>	Aspheric
		<input type="checkbox"/>	Trivex	<input type="checkbox"/>	Poly-EZ TINT	<input type="checkbox"/>	Transitions 8 AR (CR, PY)	<input type="checkbox"/>	Hard Coat		<input type="checkbox"/>
		<input type="checkbox"/>	1.60	<input type="checkbox"/>	Poly-EZ EDGE			<input type="checkbox"/>	AR		
OS:		<input type="checkbox"/>	1.67					<input type="checkbox"/>	UltraClear AR		
		<input type="checkbox"/>	1.74					<input type="checkbox"/>	Blue Block AR (Trivex, PY, 1.60, 1.67, 1.74)		

Patient Name/Tray# _____

Sphere		Cylinder		Material		Color		Coating		Design	
OD:		<input type="checkbox"/>	CR-39	<input type="checkbox"/>	Polycarbonate	<input type="checkbox"/>	Sunmart-Gray AR (PY,1.67)	<input type="checkbox"/>	Non-Coated (CR-39)	<input type="checkbox"/>	Aspheric
		<input type="checkbox"/>	Trivex	<input type="checkbox"/>	Poly-EZ TINT	<input type="checkbox"/>	Transitions 8 AR (CR, PY)	<input type="checkbox"/>	Hard Coat		<input type="checkbox"/>
		<input type="checkbox"/>	1.60	<input type="checkbox"/>	Poly-EZ EDGE			<input type="checkbox"/>	AR		
OS:		<input type="checkbox"/>	1.67					<input type="checkbox"/>	UltraClear AR		
		<input type="checkbox"/>	1.74					<input type="checkbox"/>	Blue Block AR (Trivex, PY, 1.60, 1.67, 1.74)		