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<b>PROVIDER NAME &amp; ACCOUNT NUMBER</b>	<b>DATE OF SERVICE</b>

<b>OPTICIAN</b>
<b>PATIENT NAME (FIRST, MIDDLE, LAST)</b>

	POWER				PRISM				SEG HEIGHT	OC HEIGHT	DIST PD	NEAR PD
R												
L												
	<b>SPHERE</b>	<b>CYL</b>	<b>AXIS</b>	<b>ADD</b>	<b>IN</b>	<b>OUT</b>	<b>UP</b>	<b>DOWN</b>				

<input type="checkbox"/> CR39	<input type="checkbox"/> POLY	<input type="checkbox"/> TRIVEX	<input type="checkbox"/> 1.56 BLUTECH INDOOR/OUTDOOR	<input type="checkbox"/> 1.60	<input type="checkbox"/> 1.67	<input type="checkbox"/> 1.74
<input type="checkbox"/> CLEAR	<input type="checkbox"/> TRANSITIONS				<input type="checkbox"/> POLARIZED	
	<input type="checkbox"/> GREY	<input type="checkbox"/> BROWN	<input type="checkbox"/> XTRACTIVE	<input type="checkbox"/> VANTAGE	<input type="checkbox"/> GREY	<input type="checkbox"/> BROWN

PROGRESSIVE PACKAGE PRICING (CHECK BOX)		SINGLE VISION STOCK LENSES (CHECK BOX)	
<input type="checkbox"/>	KODAK UNIQUE W/ CLEAN AND CLEAR AR	<input type="checkbox"/>	SV ASPH POLY RESOLUTION W/ CERIUM AR (-8 TO +3 UP TO -2 CYL)
<input type="checkbox"/>	DIRECT TECH W/ CLEAN AND CLEAR AR	<input type="checkbox"/>	SV POLY W/ CRIZAL AR (-3 TO +2 UP TO -1 CYL)

LENS TYPE	LENS MATERIAL	ADD ON'S	SPECIAL NOTES & INSTRUCTIONS

FRAME INFORMATION									
MANUFACTURER			NAME/SHAPE				COLOR		
A	DBL	TEMPLE	B	ED	<input type="checkbox"/>	PLASTIC	<input type="checkbox"/>	METAL	
					<input type="checkbox"/>	GROOVE	<input type="checkbox"/>	DRILL	