

COMPLETELY FILL OUT INFORMATION BELOW

**ACCOUNT INFO:**

Order Date	
Account Name	
Telephone	

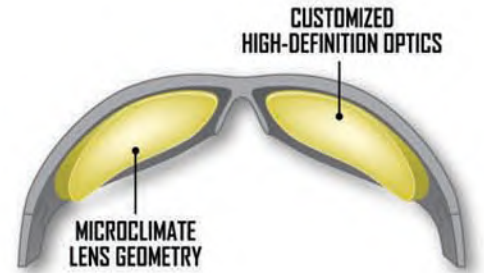
**PATIENT INFO:**

Patient Name

Lens Type  Single Vision

**GUNNAR HD SV Lens Availability**

Lens	Material	Treatments	Rx Sphere*	Cyl**	Power Shift
GUNNAR HD SV	Polycarbonate	PureCoat™ by ZEISS AR and proprietary amber lens tint	+3.00 to -4.00	to -4.00	N.A.



Rx INFO	SPHERE	CYLINDER	AXIS	PD-DIST	PRISM	BASE	ADD	SEG HEIGHT
OD								
OS								

Notes: \_\_\_\_\_

**TURNAROUND TIME: PLEASE ALLOW UPTO 1 MONTH FOR FULFILLMENT**

**SUBMIT YOUR PRESCRIPTION**

Submit completed Rx Order Form to GUNNAR Optiks INDIA via email: [rx@gunnars.co.in](mailto:rx@gunnars.co.in)

