

# ONLINE ORDER

OFFICE NAME: <input style="width: 150px;" type="text"/>			YOUR TELEPHONE: <input style="width: 150px;" type="text"/>																						
PATIENT'S NAME: <input style="width: 150px;" type="text"/>			YOUR EMAIL: <input style="width: 150px;" type="text"/>																						
DATE: <input style="width: 150px;" type="text"/>			REFERENCE: <input style="width: 150px;" type="text"/>																						
<p>MATERIAL</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> POLYCARB</td> <td><input type="checkbox"/> TRIVEX</td> <td><input type="checkbox"/> TRANSITION <input style="width: 50px;" type="text"/></td> </tr> <tr> <td><input type="checkbox"/> PLASTIC (CR39)</td> <td><input type="checkbox"/> GLASS</td> <td><input type="checkbox"/> SUNSENSOR <input style="width: 50px;" type="text"/></td> </tr> <tr> <td><input type="checkbox"/> HI INDEX <input style="width: 50px;" type="text"/></td> <td><input type="checkbox"/> (OTHER) <input style="width: 50px;" type="text"/></td> <td><input type="checkbox"/> PHOTOCROMIC <input style="width: 50px;" type="text"/></td> </tr> <tr> <td colspan="2"></td> <td><input type="checkbox"/> POLARIZED <input style="width: 50px;" type="text"/></td> </tr> </table>						<input type="checkbox"/> POLYCARB	<input type="checkbox"/> TRIVEX	<input type="checkbox"/> TRANSITION <input style="width: 50px;" type="text"/>	<input type="checkbox"/> PLASTIC (CR39)	<input type="checkbox"/> GLASS	<input type="checkbox"/> SUNSENSOR <input style="width: 50px;" type="text"/>	<input type="checkbox"/> HI INDEX <input style="width: 50px;" type="text"/>	<input type="checkbox"/> (OTHER) <input style="width: 50px;" type="text"/>	<input type="checkbox"/> PHOTOCROMIC <input style="width: 50px;" type="text"/>			<input type="checkbox"/> POLARIZED <input style="width: 50px;" type="text"/>								
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<b>R</b>	SPHERE	CYLINDER	AXIS	PRISM	BASE	<input type="checkbox"/> UNCUT <input type="checkbox"/> COMPLETE <input type="checkbox"/> SAFETY 3.0 <input type="checkbox"/> STOCK FINISHED <input type="checkbox"/> EDGE ONLY  <b>ENCLOSED</b> <input type="checkbox"/> FRAME <input type="checkbox"/> LENS																			
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<b>L</b>	ADD	SEG HEIGHT	OC HEIGHT	PDD	PDN																				
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EYE SIZE	DBL	B	ED	LENS MOUNTING																					
<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input type="checkbox"/> METAL <input type="checkbox"/> GROOVE (RIMLON) <input type="checkbox"/> ZYL <input type="checkbox"/> DRILL (3-PIECE)																					
FRAME MANUFACTURED <input style="width: 100px;" type="text"/>			SPECIAL INSTRUCTIONS: <div style="border: 1px solid black; height: 100px; width: 100%;"></div>																						
FRAME MODEL <input style="width: 100px;" type="text"/>																									
FRAME COLOR <input style="width: 100px;" type="text"/>																									
TEMPLE <input style="width: 100px;" type="text"/>																									

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