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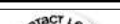
INVOICE



BILL TO	SHIP TO
3882 SUMMIT VISION CARE 615 MITCHELL WAY SUITE #103 ERIE CO 80516	SUMMIT VISION CARE 615 MITCHELL WAY SUITE #103 ERIE CO 80516

Local Courier	Sale	PO / RX					
K1	K2	AXIS	SPH	CYL	AXIS	VERTEX	PATIENT
R							
L							
BASE CURVE	AXIS	SPH	Cyl	AXIS	DIAMETER	MATERIAL LOT # / MFR	
R							
BASE CURVE	AXIS	SPH	Cyl	AXIS	DIAMETER	MATERIAL LOT # / MFR	
L	6.49	-12.00			15.90	F2300671	
Back optical diameter		8.90	Reference SAG		4.83	Lens center thickness	
						0.250	

QTY	MODEL	MATERIAL	PRICE
1	MAXIM STANDARD NO DOT 6 Month No Return (No lens return req.)	Optimum Extra 17mm Clear	211.03
			0.00
			0.00
<u>Please note if this order is requested in Valeant material, Boston or Paragon branded, it will reflect a \$5.00/\$10.00 surcharge within the pricing.</u>			

	SUB TOTAL		SHIPPING	POSTAGE	SALES TAX	TOTAL	
	\$211.03		\$4.00		\$0.00		\$215.03
	INVOICE NO	DATE	REFERENCE	TRAY	DATE IN	DATE OUT	
	23-212057	9/5/2023	AV7615		9/1/2023 14:14	9/5/2023	RX Only

