FORM-SLT1

SOFLENS TORIC TRIAL ORDER FORM

Fax order to 1-800-356-8056 BAUSCH + LOMB

ACCOUNT # ☐☐☐☐☐☐☐☐ DATE ☐☐ / ☐☐ / ☐☐

ACCT NAME ☐ PHONE # ☐☐☐ ☐☐☐ ☐☐☐☐

STATE ☐☐ ZIP CODE ☐☐☐☐☐ FAX# ☐☐☐ ☐☐☐ ☐☐☐☐

AXIS CHOOSE 1 CYLINDER PER ORDER 0.75 ◯ 1.25 ◯ 1.75 ◯ 2.25 ◯ 2.75 ◯ 2.75 CYL N/A IN PLUS

POWER	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150	160	170	180
PLANO																		
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