

**SofLens daily disposable
Trial Lens Reorder Form**

Bausch & Lomb
SofLens®
daily disposable
(hilafilcon B)

23323

Account # :

Ordered By: _____

Account Name: _____

City/State: _____

Phone #:

Fax #:

(If confirmation is needed)

Current SofLens daily disposable fitting set configuration:

<input type="checkbox"/> -0.50	<input type="checkbox"/> -2.50	<input type="checkbox"/> -4.00	<input type="checkbox"/> -7.50	<input type="checkbox"/> +2.75
<input type="checkbox"/> -0.75	<input type="checkbox"/> -2.75	<input type="checkbox"/> -4.25	<input type="checkbox"/> -8.00	<input type="checkbox"/> +3.00
<input type="checkbox"/> -1.00	<input type="checkbox"/> -2.75	<input type="checkbox"/> -4.50	<input type="checkbox"/> -8.50	<input type="checkbox"/> +3.25
<input type="checkbox"/> -1.25	<input type="checkbox"/> -3.00	<input type="checkbox"/> -4.75	<input type="checkbox"/> -9.00	<input type="checkbox"/> +3.50
<input type="checkbox"/> -1.50	<input type="checkbox"/> -3.00	<input type="checkbox"/> -5.00	<input type="checkbox"/> +0.75	<input type="checkbox"/> +3.75
<input type="checkbox"/> -1.75	<input type="checkbox"/> -3.25	<input type="checkbox"/> -5.25	<input type="checkbox"/> +1.00	<input type="checkbox"/> +4.00
<input type="checkbox"/> -1.75	<input type="checkbox"/> -3.25	<input type="checkbox"/> -5.50	<input type="checkbox"/> +1.25	<input type="checkbox"/> +4.25
<input type="checkbox"/> -2.00	<input type="checkbox"/> -3.50	<input type="checkbox"/> -5.75	<input type="checkbox"/> +1.50	<input type="checkbox"/> +4.50
<input type="checkbox"/> -2.00	<input type="checkbox"/> -3.50	<input type="checkbox"/> -6.00	<input type="checkbox"/> +1.75	<input type="checkbox"/> +5.00
<input type="checkbox"/> -2.25	<input type="checkbox"/> -3.75	<input type="checkbox"/> -6.25	<input type="checkbox"/> +2.00	<input type="checkbox"/> +5.50
<input type="checkbox"/> -2.25	<input type="checkbox"/> -3.75	<input type="checkbox"/> -6.50	<input type="checkbox"/> +2.25	<input type="checkbox"/> +6.00
<input type="checkbox"/> -2.50	<input type="checkbox"/> -4.00	<input type="checkbox"/> -7.00	<input type="checkbox"/> +2.50	<input type="checkbox"/> +6.50

Instructions: Simply mark the box to the left of each sphere power to order a 10 count trial lens pack.

Please use this form only for sphere powers listed.

Fax completed form to Bausch & Lomb at 1-800-572-8275

To reorder this form please call 1-800-828-9030

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