Prescription Eyewear - Order Form

Order Date (mm/dd/yy)

PO#: (Required)

SUPVNM (REQ#) (Required)

EMP LAST NAME (Required)

EMP FIRST NAME (Required)

Employee# (Required)

SUNGL (DEPT#) (Required)

EMPLOYEE PHONE (Required)

Company: 09907054

UC RIVERSIDE EH&S
ENHANCED SRX
900 UNIVERSITY AVE
RIVERSIDE CA 92521

Bill-To: 08917355

FISHER SCIENTIFIC
ATTN CATHELEEN DOOLEY
4500 TURBERRY DRIVE
HANOVER PARK IL 60133

Ship-To: (Account#)

Enhanced Package

Includes all 3M Safety Frames

Select from the following Lens Styles:

Single Vision
Bifocal or Trifocal
Occupational
Progressive Addition Lens (PAL)
Zeiss Instinctive (Base PAL)
3M 1
3M 2
3M 2 Short

Polycarbonate Lens Material

Tints included if ordered

Your choice of one premium coating:
Scotchgard SC Easy Clean
Anti-Fog

Eye Care Professional Instructions:

1. This employee is in need of prescription safety eyewear through the 3M program

2. This program will be invoiced through the distributor listed in the Company and "Bill to" section above.

3. Be sure to enter your ship to account information in the ship to section above to ensure proper payments of your dispensing fees.

<table>
<thead>
<tr>
<th>Lens Style</th>
<th>Lenses Only</th>
<th>Patient's Own Frame</th>
<th>Frame Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Vision</td>
<td>Digital PALs provided when available</td>
<td>Base PAL Clear CR39/Poly</td>
<td></td>
</tr>
<tr>
<td>Bifocal</td>
<td>28 35</td>
<td>3M 1</td>
<td></td>
</tr>
<tr>
<td>Trifocal</td>
<td>28 35</td>
<td>3M 2</td>
<td></td>
</tr>
<tr>
<td>Occupational 14 mm sep</td>
<td>28 35 3M 2 Short</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polycarbonate</td>
<td>Plastic CR-39</td>
<td></td>
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</tr>
</tbody>
</table>

Duty to warn: Polycarbonate/Trivex are the most impact resistant materials available & are recommended

Clear / Tinted / Photochromic Poly/Plastic

Anti-Fog (AF) / Scotchgard SC Easy Clean / Polarized

<table>
<thead>
<tr>
<th>Lens Options</th>
<th>Sphere</th>
<th>Cylinder</th>
<th>Axis</th>
<th>Prism</th>
<th>Base</th>
</tr>
</thead>
<tbody>
<tr>
<td>Right OD</td>
<td>Left OS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Add Power</td>
<td>Seg Hgt</td>
<td>Dist PD</td>
<td>Near PD</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prescription Frame</th>
<th>Eye</th>
<th>Bridge</th>
<th>Color</th>
<th>Temple</th>
</tr>
</thead>
<tbody>
<tr>
<td>Right OD</td>
<td>Left OS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frame Style</td>
<td></td>
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</tbody>
</table>

Side Shields

* Select Styles Only

Permanent / Detachable / Gray / T-LOC / Steel

Special Instructions

PLEASE CHOOSE PERMANENT OR DETACHABLE SIDE SHIELDS

Sep 2015 J 09907054 0001 09/15/15

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