

ACCOUNT NO

PRACTICE NAME

DATE

TEL

CONTACT NAME



JAI KUDO LENSES

SINGLE VISION

The Independents' Choice

FAX TO: 020 8732 9601

Tel: 020 8732 9600

Email: progressive.orders@jaikudo.com

	PATIENT REFERENCE	QTY	LENS TYPE	COATING	SPH	CYL	DIA
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	PATIENT REFERENCE	QTY	LENS TYPE	COATING	SPH	CYL	DIA
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