Amherst #5186 Ashland Noon #5188 Ashland Evening #5189

Attica #5190 Avon #5191 Bascom #5192 Bellevue #5193 Bellville #5194 Bloomville #5195 Bucyrus #5196 Butler #5197 Castalia #5198

Clyde #108030 Colonel Crawford #5199

Crestline #5200 Elmore #43464 Elyria Evening #5201 Firelands #5204 Fostoria #5205 Fremont #5206 Green Springs #5210 Hayesville #5211 Huron #5212 Jeromesville #5213 LaGrange #5214 Lindsey #5216

Lorain Harbor #48467 Loudonville #5218

Lucas #5219

Lorain #5217

Madison Twp #5220 Marblehead Penins. #43465

Mifflin #5223

Milan Edison #35338 Nevada #5225

North Fairfield #5226 North Ridgeville #5227

Norwalk #5228 Nova #5229 Oak Harbor #38133 Old Fort #5230 Ontario #5231 Perrysville #5232

Plymouth #32916

Polk #5233

Port Clinton #5234 Republic #5235 Rowsburg #5236 Sandusky #5237 Savannah #5238

Sheffield Village #10376

Shelby Branch # Sycamore #5242 Tiffin #5243 Upper Sandusky #5244

Vermilion #5245

LIONS DISTRICT 13B Vision Clinic Referral Form

Circle your club and write the billing address.

Billing address and contact phone	Referral Date
	Service Requested/Authorized
	Exam (\$50)
	Glasses (\$35)
	Other (case by case) LCH&D will contact club for arangements. Give brief description:
Patient Authorization of Service	
care and/or glasses from the Lions (Health and Dentistry permission to me pay for these services.	nt name), have requested help to obtain vision Club. I give The Lions and Lorain County communicate regarding scheduling and helping atture(signature)
Lions Club Authorizing Individu	al
Signature	
Print Name	
Contact Phone	
Fax this form to: 440-240-1663	OR Mail this form to: Lorain County Health and Dentistry 1205 Broadway Lorain, OH 44052 Attn: Call Center Lead

Alternatively: If a club has a patient they need to push thru without fax or faster than mail, contact Dr. John Smith by cell phone, text or voice mail, 440-935-3268. He will facilitate the visit for you.