Precision Optical Group INCORPORATED

Packing Slip

Account # _____   Date _____

Simply write down a patient name to ensure
we have received everything you have sent to POG.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
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16._____
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18._____
19._____
20._____

UPS Tracking # this shipment: 1Z5063E0_ _ _ _ _ _ _ _ _
*Providing this information will help to insure POG has all of your jobs when they arrive at our lab.