



Direct-Response TV – Test Program

Practice Name:
Essilor Account No.: (mandatory for reimbursement)
Address:
City, Prov.:
Postal Code:
Transitions Location ID (LIN):

Tracking Sheet

To measure the effectiveness of the direct-response program in driving new patients to independent practices and to make sure you receive your reimbursement from Essilor Canada, please complete this tracking sheet for each patient that presents you with the \$50 coupon. Please send this sheet and the coupons back to Transitions Optical by fax or mail by June 30. If you have questions, please call 1-877-254-2590.

To show our appreciation for your time, all practices that return the tracking sheet and coupons will be entered to win a \$200 pre-paid Visa Gift Card.

FAX: 1-877-254-2592

Transitions Optical ATTN: DRTV 1575 Bishop Street North, Suite 200 Cambridge, ON N1R 7J4

Date of patient purchase	Invoice No.	Is this a new patient? Yes No	If the coupon was not applied (e.g., due to insurance regulations) what was the patient's reaction?	How much did the patient spend? (after the discount, if applied)	Did the patient purchase other premium offering (e.g., AR, high- index, progressive)?

Date of patient purchase	Invoice No.	Is this a new patient? Yes No	If the coupon was not applied (e.g., due to insurance regulations) what was the patient's reaction?	How much did the patient spend? (after the discount, if applied)	Did the patient purchase other premium offering (e.g., AR, high- index, progressive)?