

Los Gatos Eye Care



15563 Union Avenue
Los Gatos, CA 95032
408-377-2020 Phone
408-377-2022 Fax

I, _____, hereby authorize
Dr. _____ to release my records,
including any prescription for glasses and/or
contact lenses, to Dr. Polhemus and Dr. Bell.

Previous Doctor's Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

Patient's Signature

Date