



**Vizavance - Advancing Children's Vision**  
Formerly Prevent Blindness Oklahoma

# Vision Screening Invoice

Vizavance  
6 NE 63rd St Suite 150  
Oklahoma City, OK 73105  
Phone: 405-848-7123  
www.vizavance.org

## Overview

Established in 1965, Vizavance, formerly Prevent Blindness Oklahoma, is the only non-profit agency in Oklahoma dedicated exclusively to advancing children's education through vision. Vizavance is providing vision screenings for the next generation of Oklahoman's innovators, achievers, and leaders.

## Funding

Vizavance is a non-profit organization supported primarily by the general public, corporations, foundations and our thrift store. Vizavance receives no state or federal funds, and is not a member of the United Way. Only 9.4% of our total budget is spent on fundraising and administrative costs.

## We're somewhere in your community.

The Children's Vision Screening Program is the cornerstone of Vizavance, formerly Prevent Blindness Oklahoma. We have been providing free vision screenings for children at elementary schools, pre-schools, Head Start centers, and day care centers since 1965. Vizavance provides services in all 77 Oklahoma counties.

Description	Unit Price	Total
Administrative Costs (actual cost vs. your reduced rate)	\$100.00	\$100.00
Standard Vision Screening of School Age Children	\$5.00 per child	N/C
Mileage of screener conducting screening	\$0.54 per mile	N/C
***Additional paperwork***	\$10.00	N/C
****Late Fee Assesment****	\$15.00	N/C
	Subtotal	\$100.00
	Tax	
	Balance Due	\$100.00

*Thank you for assisting Vizavance in Advancing Children's Vision*

**\*\*\* Fee assessment for lost or misplaced paperwork**

**\*\*\*\*Late Fee Assessment of \$15.00 will be assessed if the \$100.00 fee or a purchase order is not received prior to the completion of screening and/or if the Purchase Order is not paid within 30 days of screening\*\*\*\***

**\*\*\*\*Vizavance is only responsible to send ONE invoice to the school contact prior to the screening.\*\*\*\***

## REMITTANCE

Name of School: \_\_\_\_\_

School Address: \_\_\_\_\_

Date: \_\_\_\_\_

Amount Due: \$100.00

Amount Enclosed: \_\_\_\_\_

Send to:

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