



GLASSES FORM TO BE COMPLETED BY THE OPTICIAN AND ATTACHED TO THE INVOICE

LAST NAME OF BENEFICIARY:	
FIRST NAME OF BENEFICIARY:	
INVOICE NO:	
DATE OF DELIVERY OF GLASSES:	

TYPE OF VISION			
UNIFOCAL		MULTIFOCAL	
<input type="checkbox"/> FOR DISTANCE VISION	<input type="checkbox"/> FOR NEAR VISION	<input type="checkbox"/> PROGRESSIVE	<input type="checkbox"/> DEGRESSIVE

DIOPTRES for DISTANCE VISION				
EYE	SPHERE	CYLINDER	AXIS	ADD*
RIGHT EYE				
LEFT EYE				

* ADD to be completed for multifocal lenses (progressive/degressive please)

DIOPTRES for NEAR VISION				
EYE	SPHERE	CYLINDER	AXIS	ADD*
RIGHT EYE				
LEFT EYE				

* ADD to be completed for multifocal lenses (progressive/degressive please)

PRICE OF FRAME	
PRICE OF RIGHT LENS	
PRICE OF LEFT LENS	
PRISM	

DATE :

SIGNATURE AND STAMP OF THE OPTICIAN: _____

Please find attached the official invoice in accordance with national legislation

Reimbursement of the cost of glasses is limited to two pairs, consisting of a frame and corrective lenses regardless of type:

- either one pair of glasses with single vision lenses for near vision and one pair of glasses with single vision lenses for distance vision;
- or one pair of glasses with multifocal or progressive lenses and, if necessary, one pair of glasses for correcting short or long sight.

The JSIS does not reimburse:

- glasses with non-corrective lenses;
- sunglasses with non-corrective lenses;
- glasses for work on a computer screen for staff in active employment. (reimbursable in accordance with the rules laid down by the Medical Service of your institution/agency)



Minimum renewal periods:

Except where there has been a medically attested change in dioptre or axis of 0.50 or more, glasses may be replaced every two years, or every year in the case of children under 18. The renewal period starts on the date on which the previous pair of glasses in the same category was purchased.