

Collin Creek Eye Clinic
2821 W, Parker Rd. Ste 1
Plano, TX 75023
972.596.3722

Check/Money Order(Payable to Collin Creek Eye Clinic) \$ _____

Visa <input type="checkbox"/>	Mastercard <input type="checkbox"/>	American Express <input type="checkbox"/>	Discover <input type="checkbox"/>
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Credit Card #

Expiration Date:

Cardholder Name

Amount \$

Signature

Address