

## School of Optometry & Vision Science business cards – Template 1 – Clinic Use

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### Berkeley Traditional 1-sided – qty: 100 cards \$59

<b>First N. Last Name</b>	
Student Clinician	School of Optometry & Vision Science
Class of 20xx	200 Minor Hall Berkeley, CA 94720-2020
	University Eye Care Center: 510.642.2020
	Tang Eye Center: 510.643.2020
	Fax: 510.642.8012
	<a href="http://eyecare.berkeley.edu">eyecare.berkeley.edu</a>



### Imprint information:

Name: \_\_\_\_\_

Title: Student Clinician

Class year: \_\_\_\_\_

Dept: School of Optometry & Vision Science

Address: 200 Minor Hall, Berkeley, CA 94720-2020

University Eye Care Center: 510.642.2020

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