

Instructions for the Prescription Safety Glasses Credit Program for Connecticut and Florida Operations

1. Pick up an AO Safety electronic form from your operation center's designated contact. See the attachment labeled "[2012 Contacts for AO Safety Prescription Eyewear Order Form](#)" for the name and location of your contact.
2. Obtain your eye prescription (Rx) dated within the last two years from one the providers listed in the attachment labeled "[2012 Prescription Safety Glasses Program Providers](#)" or from your personal eye doctor.
3. Select a provider from the providers' attachment and present your Rx, AO Safety form and your Sikorsky green badge for identification to the provider. All of the providers listed are familiar with the program.
4. Choose your safety glasses.
5. Pay any amount in excess of \$85.00 to the provider. NOTE: If the prescription safety glasses exceed \$85.00, you are eligible for reimbursement for a portion of the excess amount from your medical insurance (Hourly employees only). The Davis Vision Care Reimbursement Form is located in the HR Resource Center in Stratford. Salaried employees, please refer to your health care provider for any additional benefit.

NOTE: The \$85.00 credit may be used **three** times during the term of the current contract, but not more than **once** in any given calendar year. **Employees hired after January 1, 2010, they will receive two (2) eighty-five (\$85) stipends for the purchase of prescription safety glasses.**