

Government RIC Order Form

Contract Period: May 1, 2025 - October 31, 2025

			Date	
Patient Last Name	First Name		Last 4 Digits of SSN	
BILL TO: Account Number	SHIP TO	: Account Number		
Facility	Facility			
Address				
PhoneFax	Phone .		_ Fax	
Email	Email _			
Contact	Contact			
O P.O. No O Amount _				
Select options for each hearing aid (left & r	ight)			
STEP 1: SELECT RIC PRODUCT			STEP 2: SELECT COLOR	
WIRELESS RECEIVER-IN-CANAL MODELS	CROS TRANSMITTER: UNAIDA	CROS TRANSMITTER: UNAIDABLE EAR (OPTIONAL)		
(L) (R) Edge AI RIC RT (L) (R) Edge AI mRIC R (L) (R) Edge AI RIC 312 (L) (R) Genesis AI RIC RT (L) (R) Genesis AI RIC 312	CROS Transmitter	(R) Genesis AI RIC RT CROS Transmitter (L) (R) Genesis AI RIC 312 CROS Transmitter	(L) (R) Beige (Default) (L) (R) Caramel (L) (R) Chesnut (L) (R) White (L) (R) Silver (L) (R) Graphite Gray (L) (R) Tech Black	
STEP 3: SELECT RECEIVER		1		
CUSTOM CASED RECEIVER	RECEIVER	RECEIVER LENGTH (Please	check one)	
(L) (R) L (40) (L) (R) P (60) (L) (R) UP (70) (L) (R) M (50) (L) (R) UP- (65)	(L) (R) L (40) (L) (R) P (60) (L) (R) M (50)	L: 1 2 3 4 5 R: 1 2 3 4 5		
STEP 4: SELECT COUPLING EARMOLDS			SED OPTIONS —	
EARMOLD STYLES	VENT	STYLE	VENT	
L R RIC Hollow Silicone Canal² L R RIC Earmold³ L R RIC Solid Canal² L R RIC Canal Lock³ L R RIC Semi Skeleton³ L R RIC Skeleton³ L R RIC Skeleton³ L R RIC Helix Occluded² 2 Only available in Silicone 3 Defaults to hollow when ordered in Digital SLS MATERIAL L R Digital SLS L R RIC Helix Non-Occluded L R RIC Helf Shell³ L R RIC Shell³ L R RIC Shell³ L (40 gain) RIC Hollow Canal L R L (40 gain) RIC Helix	L R IROS L R As Large as Possible R Select-a-Vent - 3.37 mm R Large Vent - 2.55 mm R Medium Vent - 1.6 mm R Small Vent - 1.2 mm R Pressure Vent - 0.8 mm R No Vent	L R Canal L R Canal Lock L R Skeleton L R Half Shell L R Shell MODIFICATIONS L R Canal Length L R Canal Length L R Canal Length L R Canal Tip: Re L R Canal Tip: Bl L R Removal Stri	n: Medium Custom cased receiver material is Digital SLS ed ue	
DOMES —				
DOME SIZE Pleas	se check one			
(L) (R) Open (L) (R) Occluded				
L: 4 mm (sleeve) 5 mm 6 mm 7 mm 9 m R: 4 mm (sleeve) 5 mm 6 mm 7 mm 9 m (L) R Power Dome				
L: 8 mm-10 mm 10 mm-12 mm 12 mm-14 n				
R: 8 mm-10 mm 10 mm-12 mm 12 mm-14 n	nm			



Credit Card Number ___

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Contract # 36C79125D0008

				Date					
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STEP 5: SELECT CHARG	ER (REGHARGE	ABLE ONLY)						
CHARGER (bold indicates default)									
StarLink Premium Charger 2.0 [RIC RT - P00008301] [mRIC - P00008300]	Starlink Charger 2.0 (RIC RT - P00008292) (mR	IC R - P00008298)							
STEP 6: CHOOSE ACCES	7								
EDGE AI WIRELESS ACCESSORIES									
StarLink Edge Remote Microphone (P00004321) StarLink Edge Table Microphone	StarLink Remote (P00002347)	e Control 2.0							
(P00004326) StarLink Edge TV Streamer (P00004315)									
GENESIS AI WIRELESS ACCESSOR	IES								
StarLink Remote Control 2.0 (P00002347)	StarLink Table M (43123-600)	StarLink Table Microphone							
StarLink Remote Mic Plus	StarLink TV Stre	amer							
(43120-610) StarLink Mini Remote Mic (43121-610)	(43119-000)								
STEP 7: AUDIOMETRIC I AUDIOMETRIC INFORM	MATION ——								
	00 1000	1500	2000	3000	4000	6000	8000		
BC BC									
E AC									
BC BC									
IMPRESSION INFORMA Sending impression with order Use impression on file	ATION ———								
SN:	SN:								
SPECIAL INSTRUCTIONS									
				Starkey, Genesis, StarLink, and the Starkey logo are registered trademarks of Starkey Laboratories, Inc. Starkey Edge is a trademark of Starkey Laboratories, Inc. ©2025 Starkey Laboratories, Inc. All Rights Reserved P00001622 6/25 F0RM3467-09-EN-GS					
AMEX Discover Master Card	○ Visa ○ Money 0	rder				Starkey Gove	ernment Services		
	, risu			6700 \	Washington Aven	ue South, Eden	Prairie, MN 55344		
Name on Card		Expiration		_		VOI	CE: 866-418-6928		

_____ Credit Card Security Code _____