

# Austin College Information Technology POSTER PRINTER REQUEST FORM

Please fill out this form for each poster you want to print.

AC Account# _____	Date Needed _____
Department _____	Authorized By _____
Name _____	Extension _____
Phone _____	Project _____
Email Address _____	

**PAPER SELECTIONS:**

- Glossy (36" wide)                     
  Heavyweight Coated (36" wide)                     
  Coated (36" wide)

NAME OF FILE TO PRINT	FINISHED DIMENSIONS	# OF COPIES
_____	_____	_____

**FOR IT STAFF USE ONLY:**

DATE RECEIVED _____ RECEIVED BY _____							
Printing Cost: (all costs are per linear inch)							
Paper	Price	X	Inches	X	# of Posters	=	TOTAL
Coated Paper	\$.25	X		X		=	
Heavyweight Coated Paper	\$.50	X		X		=	
Glossy Photo Paper	\$.75	X		X		=	
Other:							
Date Completed: _____ Estimated Time: _____							
Staff: _____							