

CVR Plotter Request Form

Instructions: Please complete the following form and have it signed by the individual whose account will be charged for this expense.

Name:	<input type="text"/>
Date:	<input type="text"/>
Size:	<input type="text"/>
Title:	<input type="text"/>
Author(s):	<input type="text"/>
Conference/Event:	<input type="text"/>
Professor:	<input type="text"/>
Cost Centre:	<input type="text"/>
PI's Approval Signature:	<input type="text"/>
For Office Use Only	
Date Plotted:	<input type="text"/>
Cost:	<input type="text"/>
Charged:	<input type="text"/>

Please note that posters will not be plotted and/or released until the proper signature is acquired.