



Rodgers &  
McDonald  
printing • graphics



## PROOF WAIVER

Company: \_\_\_\_\_

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

Rodgers & McDonald Job Number: \_\_\_\_\_

I, \_\_\_\_\_, the undersigned agree to  
Print Name  
wave my option to review proofs prior to printing the job named above. I acknowledge that I am authorized by the company named above to make this decision. By signing this agreement, I authorize Rodgers & McDonald Graphics to print the job named above without reviewing a proof and that my company, named above, will not hold them responsible for any errors or omissions.

\_\_\_\_\_  
Signature of Authorized Company Representative

\_\_\_\_\_  
Title of Authorized Company Representative

\_\_\_\_\_  
Date