

**EVALUATE A LINK PROJECTION DEMO
FOR TWO (2) WEEKS
COMPLETE FORM & FAX TO:
740-892-4838**

Yes, I want a LINK Projection System demo package shipped to me! I will ship the demo package back to A.C.S. promptly at the end of my two week evaluation period.

Name (Type or Print): _____

Signature: _____ Title: _____

1. Shipping Address **(No P.O. Box):**

ATTN: _____ Phone: _____

Company: _____

Address: _____ Dept: _____

City: _____ State: _____ Zip: _____

2. We want the two (2) week demo period to start on ____/____/20____.

3. Computer: Brand Name _____ Model # _____

4. Monitor: Brand Name _____ Model # _____

5. Monitor Cable:

Check the correct connector on the monitor cable end that plugs into the computer.
(please do not list any adapters, splitters etc. List only the **monitor cable connector**.)

___ 15 Pin Mini Dsub (3 rows of pins)

___ 15 Pin Dsub (MAC) (2 rows of pins)

___ 13W-3 (SUN) (3 coax, 2 rows of pins)

___ Digital Visual Interface (DVI) (3 coax, 2 rows of pins)

___ Other: _____

Have questions? Call 1-800-237-5465