

BROOME COUNTY PUBLIC LIBRARY—INTERLIBRARY LOAN REQUEST

(Please Print)

NAME _____ DATE _____

ADDRESS _____ ZIP _____

PHONE _____ BCPL LIBRARY CARD # _____

MATERIAL NO LONGER NEEDED AFTER _____

Requestors of ILL services must be registered members of this library. The library retains the right to refuse a request if proper verification of material cannot be provided by the requestor.

AUTHOR OR EDITOR _____

TITLE _____

PUBLISHER _____ YEAR _____

ISBN # _____ OCLC # _____

The Broome County Public Library is now charging a \$5.00 fee for this transaction. In the case that there will be an additional charge, I am also willing to pay up to \$ _____

SIGNATURE _____

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FOR LIBRARY SERVICES USE ONLY

Date Requested:

ILL #:

Date Received:

Responding Library:

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