INTERLIBRARY REQUEST FORM

LIN ____ LINEBAUGH PUBLIC LIBRARY - MURFREESBORO, TN SMY ____ SMYRNA PUBLIC LIBRARY - SMYRNA, TN

Date	Phone
Patron Name	Email
Preferred method of notificatio	n (check one): Phone Email
Patron Barcode 2368700	Address VerifiedPhone Number Verified
Book/Article Title	
Author	
Magazine Title	
Magazine Date	Volume Issue Pages
Substitute OK: yes/no Dead	dline: N/A or Date: Fee Will Pay - \$2.00 - \$10.00
3. Cancellation of a reque a \$3.00 fine. 4. Items should be returne Reference desk will be ch additional \$5.00 processions. 5. Each item will be check	A \$3.00 fine, if applicable, will be added to patron's record. est should be done prior to shipment. Failure to do so may incured on or before the due date. Items not returned to the narged to the patron in order to reimburse the lending library. And no fee will also be applied. Items at three week period (barring other restrictions by the No item may be requested a second time for six weeks from the second:
Employee Initials:	Patron Signature:
	LIBRARY USE ONLY
AGENT Request #	
Request date	•
Date Agent Unfilled	1) Request # Date UNF
•	·
ALA Request	· ————
Date ALA Unfilled	
	Date Cancelled
	All items in bold below must be filled in
	_ Date LL notified Date Patron Notified
LL	Bar Code
Date Due back to LL	Patron Date Due
	New Date Due LL
	Title record deleted – Yes / No Date LL Notified

Checkin Initials

Date Completed