



Access • Information • Service
Anytime • Anywhere

Interlibrary Loan Request Form

Date: _____ **Needed by:** _____

Book request:

Author: _____

Title: _____

Publication date: _____ **This Edition only: Yes__ NO__**

OCLC: _____ **ISBN :** _____

Serial/ Periodical request:

Author: _____

Journal: _____

Article: _____

OCLC: _____ **ISSN:** _____

Volume: _____ **Issue:** _____

Date: _____ **Pages:** _____

Customer information:

Name: _____

Library Card No.: _____ **Pickup Branch:** _____

Address: _____

Phone: _____ **Cell Phone:** _____

E-mail: _____

Charges: HCPL charges \$5 per item when material arrives \$ 5.00
Customer agrees to pay lending library charges up to \$ _____
Total max. amount \$ _____
=====

Staff name / Comments: _____

Staff use only: Request # _____ Date: _____ Initials: _____ rev 6/10