

**INTERLIBRARY LOAN REQUEST  
Butt-Holdsworth Memorial Library**

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Barcode: \_\_\_\_\_

*I agree to pay for return postage if the item is received by the library.* \_\_\_\_\_

**Material Type:**

Book/Print      Article      Audio      Visual      Other: \_\_\_\_\_

Title: \_\_\_\_\_

Author: \_\_\_\_\_

Publication Title: \_\_\_\_\_

ISBN: \_\_\_\_\_ Year: \_\_\_\_\_ Vol. & No.: \_\_\_\_\_ Pages: \_\_\_\_\_

Some lenders charge a borrowing fee. Do you agree to pay an additional lender fee, if any?

NO \_\_\_\_\_ YES \_\_\_\_\_ maximum amount \_\_\_\_\_

For office use only: OCLC#: \_\_\_\_\_ Request ID# \_\_\_\_\_

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