

INTERLIBRARY LOAN REQUEST

Your School _____	Courier delivery: CDLC	CDLC Code: CRB
School Address _____	Date _____	Needed Before _____
_____	Contact Person: _____	Phone _____

Book Author: _____

Book Title: _____

Edition, publisher, date: _____

OR

Serial title _____

Vol: _____ No: _____ Date: _____ Pages: _____ CCG: _____ CCL: _____

Article Author: _____

Article title: _____

Route to these libraries	Call no:	Report:	Date:	Requesting library Notes
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	