

INTERLIBRARY LOAN REQUEST FORM

West Florida Public Library, Pensacola, FL

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Up to 5 requests can be placed within a 60-day period. For any questions, please contact the Interlibrary Loan Department at (850) 436-5066.

Photocopy/Microform Request

*Required entries have **

*Periodical, Book, or Microfilm

Title: _____

*Article Title: _____

Author: _____

*Date: _____ Pages: _____ Vol. No.: _____

Notes: _____

I agree to pay \$ _____ max for any fees charged by the lending library.

Signature: _____

Patron Info

*Item Pickup Site (Branch): _____

*Card No.: 12365 _____ *Name: _____

*Patron Address: _____ *City: _____ *Zip: _____

*Contact Information (How do you want to be notified?) *Please number by preference in () parentheses

() Home Phone: _____ () Work Phone: _____

() Cell Phone: _____

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(Branch)

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Date Request Received: _____ Request taken at _____ by Staff: _____