

**Interlibrary Loan Request Form**

Lake County Library System

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

**Check one:**

- Astor County Library
- Cagan Crossings Community
- Cooper Memorial Library
- East Lake County Library
- Fruitland Park Library
- Helen Lehmann Memorial Library
- Lady Lake Public Library
- Leesburg Public Library
- Marianne Beck Memorial Library
- Marion Baysinger Memorial Library
- Minneola Schoolhouse Library
- Paisley County Library
- Tavares Public Library
- Umatilla Public Library
- W.T. Bland Public Library

Please **print legibly in ink** and use one form per request.

**Need item before:** \_\_\_\_\_

**OVERDUE FINES FOR INTERLIBRARY LOANS ARE \$1.00 PER DAY**

Requested by: \_\_\_\_\_

Phone request taken by: \_\_\_\_\_

I agree to pay all fines and damages incurred from the loan of materials through ILL that are charged to me or my dependents.

Complete Library Card #: \_\_\_\_\_ Local Daytime Phone #: \_\_\_\_\_

There is no guarantee that the item requested can be located. Requested books must have copyright date of a year or older. No requests can be made for books published in the current year. Videos, audios, and microfilms are RARELY loaned. Supplying Library's restrictions must be observed. Please check the database before making a request. Your library account must be in good standing before ILL is checked out.

**BOOK INFORMATION**

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

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

Date: \_\_\_\_\_ Edition: \_\_\_\_\_ This Edition Only:[Y / N] Most Current Edition:[Y / N]

Series: \_\_\_\_\_

ISBN#: \_\_\_\_\_ OCLC# \_\_\_\_\_

**PERIODICAL INFORMATION**

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

ISSN#: \_\_\_\_\_

Volume: \_\_\_\_\_ Number: \_\_\_\_\_ Date: \_\_\_\_\_ Pages: \_\_\_\_\_

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

Article Author(s): \_\_\_\_\_

**Most ILLs are free but some libraries charge to borrow or photocopy**

Maximum cost patron is willing to pay for loan or copies: \$ \_\_\_\_\_

(Place Ø if unwilling to pay for any loan, "Contact or call me" if willing to consider charge if necessary)

**I have read and agree to the terms of this request:** \_\_\_\_\_

**(your signature here please)**

**FOR OFFICE USE ONLY**

ILL#: \_\_\_\_\_ Due Date: \_\_\_\_\_ Processed: \_\_\_\_\_

From: \_\_\_\_\_ Renewal Request: \_\_\_\_\_

Shipped: \_\_\_\_\_ New Due Date: \_\_\_\_\_

Received: \_\_\_\_\_ Returned: \_\_\_\_\_

Notes: \_\_\_\_\_

Records: \_\_\_\_\_ Holdings: \_\_\_\_\_