

PORT AUSTIN TOWNSHIP LIBRARY

Port Austin, Michigan

CLAIMS RETURNED

Name: _____ (Please print)

Patron Number: _____

Address: _____

Phone: _____ Cell: _____

Email: _____

* **To file a claim**, both the patron and a library staff member must have searched the library at least one time each for the lost material.

Office Use Only

1. Overdue material lost: Book Video Audio Other

Title _____

Author(s) _____

Cost _____ (No charge at this time)

Date _____

2. Overdue material lost: Book Video Audio Other

Title _____

Author(s) _____

Cost _____ (No charge at this time)

Date _____

After two such claims have been filed, the patron will be responsible and billed for the current material after one search of the library.

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