

	REPLACEMENT FOR LOST AND DAMAGED MATERIALS	Document No. : FM-LB-18-02
		Effective Date: June 2018

Date Filed: _____

===== To be filled out by Patron =====

Patron Information:

Name (Signature Over-Printed Name) _____

Email/Contact Number: _____ Program/School _____

===== To be filled out by RSS / ERIS Section =====

Lost/Damaged Item Information:

Title/Description/Year: _____

Author _____ Date Borrowed _____

Acc. No. _____ Call No. _____ ISBN/ISSN _____ Format. _____

Details (Identify the specifics) _____

Recommended Title:

Title/Description/Year: _____

Author _____ ISBN/ISSN _____ Format: _____

Details (Identify the basis of choice) _____

Branch/Unit Librarian

(Signature Over printed Name /Date)

Section Head Librarian

(Signature Over printed Name /Date)

===== To be filled out by Technical Services =====

Supplier: _____ Amount _____

Date Delivered: _____ Received by: _____

Acquisitions Librarian

(Signature Over printed Name /Date)

Date Processed: _____ Received by (Unit/Section Librarian): _____

Cataloger

(Signature Over printed Name /Date)

Approval:

Chief Librarian

(Signature Over printed Name /Date)