

Instructions for use of the Document Delivery form for the Borland Library

- * **Complete one form for each item requested**
- * **Print or type information**

Explanation of fields:

DATE - date the request is being ordered

NAME - first and last name of patron

DEPARTMENT OR FIRM NAME - hospital department or outside firm name of the patron

ADDRESS - complete billing address including city, state and zip code

PHONE NUMBER - telephone number or pager number of patron

FAX NUMBER - if the request is to be faxed include fax phone number

AUTHORIZED BY - all requests must be authorized by the individual responsible for payment.

CHARGE TO - circle one that applies

Individual - if the item is charged to the person in the NAME field.

Department/Firm - if the item is charged to the Department of Firm

DELIVERY TYPE - circle how the item will be delivered to you

INTERLIBRARY LOAN APPROVED - If the item is not available at Borland or at one of the in town consortium libraries we can obtain them for a fee. (Please call the library for the fee structure) If you are approving this circle YES, if not, circle NO

MAX COST - maximum cost you will pay for this item

For a Journal Article Request fill in the left side of form:

JOURNAL TITLE - complete journal title

AUTHOR - author of article, include first initial or first name

VOLUME - volume number

ISSUE - issue number

PAGES - page numbers (beginning and ending)

DATE - date of article, year and month

ARTICLE TITLE - article title

VERIFICATION - see below*

For a Book Request fill out the right side of the form:

AUTHOR(S) - author of book

TITLE - complete title of book, do not abbreviate

EDITION - edition of book

DATE PUBLISHED - publication date

PUBLISHER - publisher

PLACE OF PUBLICATION - place of publication

***VERIFICATION** - For faster service, if your citation is from a computer (MEDLINE, CINAHL etc..) search, include the UI or PMID number here. Also include the database. If not from a computer search include the source of the citation.