

Laminating Form

I have read and understand the Three Rivers Public Library District policy regarding lamination.

Items left for processing (include description, size, and number of pages)

I take special note of the following:

- The Library has the right to dispose of items not picked up 7 days after notification
- The Library is not responsible for damage or loss of materials or the final condition of processed materials. No refunds will be issued.

NAME (PLEASE PRINT)

(_____) _____ -
PHONE

SIGNATURE

_____/_____/_____
DATE

(STAFF USE ONLY)

DATE LEFT FOR PROCESSING: _____ **STAFF INITIALS:** _____

AMOUNT PAID: _____ **STAFF INITIALS:** _____

DATE OF PROCESSING: _____ **STAFF INITIALS:** _____

DATE CUSTOMER NOTIFIED: _____ **STAFF INITIALS:** _____

DATE OF PICKUP: _____ **STAFF INITIALS:** _____

Adopted 09/09/09
Reviewed 01/11/17