



LOST BOOK(S) REPORT FORM

This form functions as a request for immediate billing of the specific item(s). Billing will include current replacement cost, a service charge, and fines incurred up to the date of form receipt by Public Access Services.

Name (Please Print): _____

Email: _____

Telephone: _____

Signature: _____ Date : _____

Bring Completed Form to:
Circulation Counter, 1st floor Millar Library

Or Mail / Fax:
ATTN: Billing Clerk - (addresses listed below)

PUBLIC ACCESS SERVICES | T 503.725.4424 | F 503.725.4524
Campus Mail: PAS / LIB | P.O. Box 1151 Portland, OR 97207-1151

INTERNAL USE ONLY

Date Received _____ Staff Initials _____

Lost Book Charge _____ Service Charge _____ Overdue Charge _____

NOTE: Staff please print item record of lost book(s) and attach to this form.