



Interlibrary Loan Request Form

PAHKISIMON NUYE,ÁH LIBRARY SYSTEM

Bag service 6600

Phone: 306-425-4525

La Ronge, SK

Fax: 306-425-4572

S0J 1L0

E-Mail: pnlsoffice@pnls.lib.sk.ca

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|---|------------------|--|
| Check out what we have at: http://pahkisimon.ca IF not found on the website – FILL out this form and <u>fax or email</u> – so that we can send to other sources. | | Date: |
| Please state the date required if urgent. | | Additional Information if available |
| Will accept a substitute? yes__ no__ | | |
| Call Number: | | |
| Author: | | |
| Title: | | |
| Library or School: | Barcode: | Sent to Interlibrary Loans office at Palliser Regional Library Date: |
| Name: | | |
| Mailing Address & Postal Code: | | |
| Telephone: | Reason not sent: | |
| | | |



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