Transfer Form

Library Material to be Transferred: _____

Transfer From: _____ Signature: _____ Date: _____

Transfer to: _____ Signature: _____ Date: _____

Call no.: _____ Title: _____

Author: _____ Publisher: _____

Date: _____ Accession/Copy #: _____

Vols: _____   Record #: _____   Barcode: _____

CAT Dept. _____   SL: _____   OCLC: _____

Call no.: _____ Title: _____

Author: _____ Publisher: _____

Date: _____ Accession/Copy #: _____

Vols: _____   Record #: _____   Barcode: _____

CAT Dept. _____   SL: _____   OCLC: _____

Call no.: _____ Title: _____

Author: _____ Publisher: _____

Date: _____ Accession/Copy #: _____

Vols: _____   Record #: _____   Barcode: _____

CAT Dept. _____   SL: _____   OCLC: _____

Call no.: _____ Title: _____

Author: _____ Publisher: _____

Date: _____ Accession/Copy #: _____

Vols: _____   Record #: _____   Barcode: _____

CAT Dept. _____   SL: _____   OCLC: _____

Call no.: _____ Date: _____

Author: _____

Title:

Publisher:

Accession/Copy #:

Vols: Record #: Barcode:

CAT Dept. SL: OCLC: