THE WROBLEWSKI LIBRARY OF THE LITHUANIAN ACADEMY OF SCIENCES

INTERLIBRARY LOAN

**Book order form No.**

Date

**A fee is charged for this service.** A librarian will contact you at the e-mail address provided by you to let you know the fee for this service

\* are mandatory to fill in

**Borrower information:**

Name, surname\*

Library card number\*

E-mail\*

Home address

Phone number

**Ordered item information:**

Author\*

Title\*

Publisher, place of publication

Year of publication\*

ISBN

**Notes**

I agree to pay for this service: