

Bethlehem Area Public Library Publication Copy Services — Request Form

Submit by: (1) typing in spaces below, (2) printing completed form, (3) mailing with self-addressed envelope and check or money order payment equal to **number of requested articles X \$5.00**

Publication Title

Date, Page No., Column No.

Headline

Sample entry:

Bethlehem Globe-Times

May 15, 1990 pg1:col3

Libraries have all the answers!

(1)

(2)

(3)

(4)

(5)

(6)

(7)

Total number of articles requested x \$5.00 each

Name

Address

City, State, Zip Code

Daytime Phone & Email

1. Be sure to provide a stamped, self-addressed envelope.
2. Make your check payable to the Bethlehem Area Public Library.
3. Mail request form, S.A.S. envelope and **payment equal to number of articles X \$5.00** to:

**Adult Services Department
Bethlehem Area Public Library
11 West Church Street
Bethlehem, PA 18018**

Note that we are unable to process any request via email, fax or telephone. Allow two (2) weeks for processing. Please limit your requests to seven (7) articles per month.