

## Lost Item Payment

**Clear Form** 

Total: \_\_\_\_\_

Date:	Borrowing Library: _		
	Owning Library:		
Borrower Name:		Barcode:	
Item Title:			
Item Barcode:			
		Lost Charg	e:
Callage and law		_	e:
Collected by:			al:
Adopted 4/14/16			
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	Lost iteli	n Payment	Cicai i oiiii
Date:	Borrowing Library:		
	Owning Library:		
Borrower Name:			
Item Barcode:			
	Lost Charge:		
		Processing Fe	e:
Collected by:		Tota	al: