

NON-AUTOMATIC TRANSFER
(Request for one-time transfer)

____ **Periodical / Serial**
Send to: **Technical Services**
509 Hale Library

____ **Monograph**
Send to: **Review Room**
509 Hale Library

____/____
(Bibliographer / Date)

___ **Approved** ___ **Not approved**

Title of material:

Vol./yr./ed/:

From: _____
(Location)

To: _____
(Location)

Special Instructions:

Comments:

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