

**Orion Township Public Library  
Claims Returned Form**

**FIRST OCCURANCE**

This form should be filled out and signed by patron on first occurrence of an item being returned and not being checked in and/or not being located in the library.

Customer Name: \_\_\_\_\_

Library Card Number: \_\_\_\_\_

Item Title: \_\_\_\_\_

Item Barcode Number: \_\_\_\_\_

The Orion Township Public Library will allow one item to be set to a claims returned or claims never had. If a second item becomes a claim issue the patron is responsible for \$15.00 administrative fee.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Initial: \_\_\_\_\_ Date: \_\_\_\_\_

**SECOND CLAIM/SAME PATRON**

This form should be used if this is the *second time* you believe you have returned an item that the library's computer system indicates has not been checked in and is not found in the library. Once you file a claim, the library will search for the item for 6 (6) months.

Customer Name: \_\_\_\_\_

Library Card Number: \_\_\_\_\_

Item Title: \_\_\_\_\_

Item Barcode Number: \_\_\_\_\_

I agree that if the item is not found after six (6) months, I will be billed a \$15.00 administrative fee.

Payment is due within 30 days. Refunds will not be issued.

Substitute items will not be accepted in lieu of payment.

Overdue fines may be applied to your account.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Initial: \_\_\_\_\_ Date: \_\_\_\_\_

