

Montgomery County Magazine Copy Request

\$2 an article up to a maximum of 5 articles per order.

(Please do not send multiple requests. Allow us to fill one before you send another.)

Name of Article	Month	Year	Page

Your name: _____

Street address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail address: _____

You may request a response via e-mail (we e-mail you the digitized file) or regular mail.

Check one:

E-MAIL (Please send the following for an e-mail response.)

- this printed and completed page (please print your e-mail address legibly)
- payment —do not send cash (make check or money order payable to Crawfordsville District Public Library; for credit cards, call us at 765-362-2242, ext. 117)

REGULAR MAIL (Please send the following for a regular mail response.)

- this printed and completed page
- payment —do not send cash (make check or money order payable to Crawfordsville District Public Library; for credit cards, call us at 765-362-2242, ext. 117)
- self-addressed stamped business envelope

PRINT AND SEND TO:

Reference Department, attn: Local History
 Crawfordsville District Public Library
 205 S. Washington Street
 Crawfordsville, IN 47933

LIBRARY USE ONLY

Date received: _____

Date sent: _____

Payment amount: _____

Librarian: _____

Check no.: _____

Librarian: _____