

# LIBRARY RECOMMENDATION FORM



TO: Librarian/Library Acquisition Committee

FROM: \_\_\_\_\_

Position: \_\_\_\_\_ Department: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

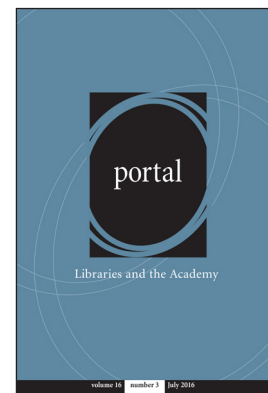
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