THE PATRON RECORD

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							Insert	Save/C	I Delete	Print	Close
p11259334 Last Updated: 01-28-2022 Created: 12-14-2021 Revisions: 2											
Expiration Date	e 1	12-14-2022		Birth Date	07-04-2003	ILL Request	0				
Not Used				Home Library	wl Willmar Library	Current Item C	0				
Not Used				Patron Message	- NO MESSAGE	Current Item D	0				
Not Used		0		Manual Block		City/Township	824 Six Mile Grove township				
Patron Type		Child		Claims Returned	0	Patron Agency	3 Maynard Public Library				
Total Checkouts)		Money Owed	\$0.00	Last Circ Activity					
Total Renewal	ls 0	0		No of DVD Checked out	0	Preferred Language					
Current Checkouts)		Current Item B	0	Notice Preference	z EMAIL				
Name		LAST NAME SUFFIX, PREFERRED NAME									
Name		LAST NAME SUFFIX, FIRST NAME MIDDLE NAME									
Guardian		LAST NAME SUFFIX, FIRST NAME MIDDLE NAME DL or ID # (IDENTIFY IF NOT MN LICENSE)									
Address		Street 123 4TH ST SW PO BOX 123 City/State/Zip SOMEWHERE MN 55555-1212									
Add 2											
Address 2	Street		123 5TH ST NE PO BOX 456								
Tolonhone		City/State/Zip NOWHERE MN 99999-1212									
Telephone	XXX-XXXX										
Telephone 2	XXX-XXXX										
DL or ID#	12345678912 (IDENTIFY IF NOT MN LICENSE) LEAVE BLANK IF CHILD'S CARD (DO NOT PUT GUARDIAN DL or ID# HERE)										
Message		MESSAGE IN ALL CAPITAL LETTERS FOLLOWED BY YOUR INITIALS LIBRARY NUMBER OR TWO LETTER CODE & TODAYS DATE									
Note	NOTE IN ALL CAPITAL LETTERS FOLLOWED BY YOUR INITIALS LIBRARY NUMBER OR TWO LETTER CODE & TODAYS DATE										
Barcode	26601000001234										
Barcode	2660100000004LOST YOUR INITALS LIBRARY NUMBER OR TWO LETTER CODE & TODAYS DATE										
Email	asdfg@	asdfg@gmail.com									

- 1. Expiration Date is one (1) year from date of renewal.
- 2. Birth Date Is required
- 3. Home Library (should always be the 2 letter code)
- 4. City/Township
- 5. Patron Agency
- 6. Patron Type (Use Non-Resident, South Dakota, & Clarkfield when applicable)
- 7. Notice Preference (Email or Print)
- 8. Name (Last Name Suffix, First Name Middle Name; all capital letters)
- 9. Address (All capital letters, no punctuation marks, abbreviate words like ST, AVE, BLVD)
- 10. Telephone should be entered as: XXX-XXX-XXXX (If the patron does not have a telephone number enter "000-000-0000 No Telephone)
- 11. Email address Must in "@" symbol
- 12. Driver's License/ ID (should be no spaces or dashes Identify if not a MN License, Leave blank if child's card) Do not put Guardian DL or ID# here.