

Filmstrip/Video/DVD Request
Central Kansas Library System
Youth Services Department

Code No.	TITLE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Date Requested for Use _____

Send request to CKLS Youth Services Department
1409 Williams
Great Bend, Kansas 67530

***Filmstrips/Videos/DVDs must be mailed to CKLS the day after they are shown.**

Library Name

Phone Number 2005

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