



Texas Department of State Health Services  
Audiovisual Library, MC 1975  
P.O. Box 149347, Austin TX 78714-9347

Toll-free phone: (888) 963-7111 x7260 Austin phone: (512) 776-7260 Fax: (512) 776-7474  
Internet: <http://www.dshs.texas.gov/avlib/> E-mail: [avlibrary@dshs.texas.gov](mailto:avlibrary@dshs.texas.gov)

**MEDIA ORDER BLANK**

<b>CHECK BOX FOR CHANGE OF ADDRESS</b>			User #
Borrower's Name			Fill in if known, otherwise leave blank
Organization			Business Phone (include area code)
Address (mailing)	City	Zip	County
Address (physical)	City	Zip	Home Phone (include area code)
If you supply us with your fax number and e-mail address, we will forward information on your orders electronically and send e-mails on new acquisitions.			
E-mail			Fax (include area code)
I acknowledge financial responsibility to the State of Texas should items requested below be lost, stolen or damaged from the date I receive the items until the materials have been received in the library. I understand that it is strongly recommended that items be insured on their return to the library and that, if I fail to do so, I will be charged the full replacement cost for all lost, stolen or damaged items. I have read and agree to the terms of the <a href="#">Statement of Responsibility</a> . <b>Privacy Notification:</b> With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <a href="http://www.dshs.texas.gov/policy/privacy.shtm">http://www.dshs.texas.gov/policy/privacy.shtm</a> for more information on Privacy Notification. (Reference: Government Code, Section 552.021, 552.023, 559.003 and 559.004)			
Signature		Sign Here	Date

English media only?	Yes	No	Which media formats can you use?					
May we shift dates?	Yes	No	VHS video	DVD	audio CD	CD-ROM	model	book

No.	Media Title	Catalog Number	Date to Receive	Date to Return
1	First choice			
	Alternate title or date			
2	First choice			
	Alternate title or date			
3	First choice			
	Alternate title or date			
4	First choice			
	Alternate title or date			
5	First choice			
	Alternate title or date			
6	First choice			
	Alternate title or date			
7	First choice			
	Alternate title or date			
8	First choice			
	Alternate title or date			