OCTOBER 2019

LIBRARY NAME: _____

DELIVERY ID: _____   *CONTACT EMAIL:* _____

This log is to be filled in by the LIBRARY's staff!!!

*** PLEASE RECORD NUMBER OF <u>OUTGOING</u> PACKAGES DAILY ***

DAY OF MONTH	INITIALS OF DRIVER	PACKAGES SENT
1		
2		
3		
4		
S/S		
7		
8		
9		
10		
11		
S/S		
14	*COLUMBUS DAY*	
15		
16		
17		
18		
S/S		
21		
22		
23		
24		
25		
S/S		
28		
29		
30		
31		

TOTALS:

- **Make sure library's name is on the form: PLEASE TALLY TOTALS at the end of the month.**
- Maintain local file of this statistics sheet for 12-months (rolling).
- **Total the delivery statistics at the end of the month and submit them online no later than the 10th of the following month** (Online Form: http://librarylinknj.org/delivery/stats-report-form).
- Please read the new requirements for reporting your monthly delivery statistics online at: http://librarylinknj.org/delivery/statslog
- **Please note any missed delivery or problem directly onto this sheet along with a call to our office.**