



# کاربرگ خلاصه سمعی و بصری لاتین

شماره برگه :

Reference

Main Entry Type

Author / Corp. Body

Title

LC No.	Dewey No.
--------	-----------

Author
--------

Birth – Death	Cast
---------------	------

Corp. Body
------------

Addition
----------

Main Title
------------

Media Type
------------

Other Titles

Author Statement
------------------

Edition
---------

Edition Statement
-------------------

Dates of Publication
----------------------





# کاربرگ خلاصه سمعی و بصری لاتین

شماره برگه :

Production Place	Producer	Distributor

<b>Production Year</b>
------------------------

Collation	Supplement

Series	Series No.

Notes





Descriptor	Free – Floating Subdivision

Type	Added Entry		
<input type="radio"/> Author <input type="radio"/> Corp. Body <input type="radio"/> Title <input type="radio"/> Series <input type="radio"/> Producer <input type="radio"/> Author. Title <input type="radio"/> None	Author	Birth - Death	Cast
	Corp. Body	Addition	
	Producer		
	Title / Series / Others		
<input type="radio"/> Author <input type="radio"/> Corp. Body <input type="radio"/> Title <input type="radio"/> Series <input type="radio"/> Producer <input type="radio"/> Author. Title <input type="radio"/> None	Author	Birth - Death	Cast
	Corp. Body	Addition	
	Producer		
	Title / Series / Others		
<input type="radio"/> Author <input type="radio"/> Corp. Body <input type="radio"/> Title <input type="radio"/> Series <input type="radio"/> Producer <input type="radio"/> Author. Title <input type="radio"/> None	Author	Birth - Death	Cast
	Corp. Body	Addition	
	Producer		
	Title / Series / Others		
<input type="radio"/> Author <input type="radio"/> Corp. Body <input type="radio"/> Title <input type="radio"/> Series <input type="radio"/> Producer <input type="radio"/> Author. Title <input type="radio"/> None	Author	Birth - Death	Cast
	Corp. Body	Addition	
	Producer		
	Title / Series / Others		



# کاربرگ خلاصه سمعی و بصری لاتین

شماره برگه :

Language
----------

Copy No.	Reel No.	Part No.	Accession No.	Location	Bar Code	Material Form	Others

نام و امضاء وارد کننده	نام و امضاء کنترل کننده	نام و امضاء تکمیل کننده
تاریخ ورود اطلاعات	تاریخ کنترل کاربرگ	تاریخ تکمیل کاربرگ

--

