# Acquisitions: Getting Started
## For Multi-Branch Systems
These worksheets will assist you in gathering the information required to set up the Acquisitions Module.

## Library Name:_____

## FUNDS

Check the boxes of the sources from which you receive collection funding for the year

☐ Municipal Government               ☐ Capital Funds
☐ Provincial Government               ☐ Donations
☐ Public Library Services Branch      ☐ Fundraising
☐ Federal Government                  ☐ Friends of the Library
☐ Regional District                   ☐ Other: _____

List your specific Yearly Collection Funding Sources below and the amount of funding you receive

## FUNDING SOURCES WORKSHEET

*ie. City of Fiction*                                      *$        275 654.78*

1.  _____   $_____.____

2.  _____   $_____.____

3.  _____   $_____.____

4.  _____   $_____.____

5.  _____   $_____.____

6.  _____   $_____.____

7.  _____   $_____.____

8.  _____   $_____.____

9.  _____   $_____.____

10. _____   $_____.____

                        Total Funding for YYYY        $_____.____

# COLLECTION FUNDS WORKSHEET

In Evergreen you can create funds at the system level or create a separate group of funds for each branch depending on how acquisitions is handled at your library.

1. List your Collection Funds at the organizational level.
2. Assign a percentage of your total funding to each fund. (Your percentages must add up to 100%)
3. List the Funding Source(s) for each fund.
4. Calculate the dollar amount to be allocated to each fund from the Funding Source(s).
5. If you plan create these funds in Evergreen assign a code to each fund.

| Code | Fund Name | Percentage | Dollar Amount | Funding Source(s) |
|---|---|---|---|---|
| ANF | Adult Non-Fiction | 10.00% | $27 565.48 | City of Fiction |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | | % | $ | |
| | Total | 100.00% | $ | |

# BRANCH FUNDS WORKSHEET

1. Fill in the name of your collection at the top of the worksheet.
2. Fill in the total amount of funds for the collection.
3. List all the branches that will receive funds from the collection fund.
4. Give the each branch's fund a name and a unique fund code.
5. Assign a percentage of the Collection Fund to each branch (Your percentages must add up to 100%)
6. Calculate the dollar amount to be allocated to each fund from the funding source or from a system level fund.
7. Repeat for each collection for your library.

Name of Collection : _____      Total Funds: _____

| Branch | Fund Code | Percentage | Dollar Amount |
|---|---|---|---|
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | Total | % | $ |

Name of Collection : _____      Total Funds: _____

| Branch | Fund Code | Percentage | Dollar Amount |
|---|---|---|---|
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | Total | % | $ |

Name of Collection : _____    Total Funds: _____

| Branch | Fund Code | Percentage | Dollar Amount |
|---|---|---|---|
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | Total | % | $ |

Name of Collection : _____    Total Funds: _____

| Branch | Fund Code | Percentage | Dollar Amount |
|---|---|---|---|
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | Total | % | $ |

Name of Collection : _____    Total Funds: _____

| Branch | Fund Code | Percentage | Dollar Amount |
|---|---|---|---|
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | | % | $ |
| | Total | % | $ |

**CLAIM POLICIES**

All claiming in Evergreen is currently manual. Libraries can setup claim policies to alert them when an item is claim ready.

Claim Policy Name: _____
Period to wait until you make Claim: _____
Method of Contact: _____

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Period to wait until you make Claim: _____
Method of Contact: _____

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Period to wait until you make Claim: _____
Method of Contact: _____

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Method of Contact: _____

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Method of Contact: _____

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Period to wait until you make Claim: _____
Method of Contact: _____

Claim Policy Name: _____
Period to wait until you make Claim: _____
Method of Contact: _____

Claim Policy Name: _____
Period to wait until you make Claim: _____
Method of Contact: _____

# PROVIDERS (VENDORS) WORKSHEET

List all vendors you purchase collection materials from.  Choose the Default Claiming Policy from the above list.

**Provider (Vendor)**

Name of Provider:_____          EDI Account *(circle)*: yes/ no

Name of Contact:                                    SAN (Standard Address Number):
_____                           _____

E-mail:                                             Holdings Tag:
_____                   _____

Phone:                                              Currency:
_____                   _____

Fax:                                                *Ordering Discount:*
_____                   _____

Types of Materials Ordered:
    ☐ books         ☐ music CDs         ☐ games
    ☐ magazines     ☐ playaways        ☐ story boxes
    ☐ DVDs          ☐ audiobooks      ☐ other: _____
    ☐ VHS          ☐ electronic books

Default # of Copies: _____

Default Claiming Policy: _____

Ordering Frequency:
☐ All the time    ☐ Quite often   ☐ A few times a year  ☐ Only special orders ☐ Last time I ordered?

**Congratulations, now that you have gathered all the necessary information you are ready to set up the Acquisitions Module in Evergreen.**

For specific Evergreen instructions see the [Sitka Evergreen Aquisitions Manual: Part III Administration](#)

**Provider (Vendor)**

Name of Provider:_____     EDI Account *(circle)*: yes/ no

Name of Contact:                              SAN (Standard Address Number):
_____                      _____

E-mail:                                       Holdings Tag:
_____              _____

Phone:                                        Currency:
_____              _____

Fax:                                          *Ordering Discount:*
_____              _____

Types of Materials Ordered:
    ☐ books        ☐ music CDs        ☐ games
    ☐ magazines     ☐ playaways      ☐ story boxes
    ☐ DVDs         ☐ audiobooks     ☐ other: _____
    ☐ VHS          ☐ electronic books

Default # of Copies: _____

Default Claiming Policy: _____

Ordering Frequency:
☐ All the time   ☐ Quite often   ☐ A few times a year  ☐ Only special orders ☐ Last time I ordered?

**Provider (Vendor)**
Name of Provider:_____     EDI Account *(circle)*: yes/ no

Name of Contact:                              SAN (Standard Address Number):
_____                      _____

E-mail:                                       Holdings Tag:
_____              _____

Phone:                                        Currency:
_____              _____

Fax:                                          *Ordering Discount:*
_____              _____

Types of Materials Ordered:
    ☐ books        ☐ music CDs        ☐ games
    ☐ magazines     ☐ playaways      ☐ story boxes
    ☐ DVDs         ☐ audiobooks     ☐ other: _____
    ☐ VHS          ☐ electronic books

Default # of Copies: _____

Default Claiming Policy: _____

Ordering Frequency:
☐ All the time   ☐ Quite often   ☐ A few times a year  ☐ Only special orders ☐ Last time I ordered?