

RIVERSIDE PUBLIC LIBRARY
CUSTOMER REQUEST FOR RECONSIDERATION OF LIBRARY MATERIALS

To assure prompt, complete consideration of your request, we need the following information.

If you wish to provide more information, please attach a letter to this form, addressed to the Library Director, or use the other side.

Name of your library location: _____ Date: _____

Title: _____ Author: _____

Publisher: _____ Year Published: _____

Type of material (book, magazine, newspaper, e-material, DVD audiobook, toy, digital device, etc.) _____

What brought this material to your attention? _____

Did you read, view, or hear it in its entirety? _____ Yes _____ No

Why do you object to this material? Please be specific

Have you read or heard any reviews or comments on it? (Please mention sources if you are able.) _____

Do you represent yourself, a group, or an organization?

Signature:

Name: _____

Phone: _____ Email: _____

Address: _____

For Staff Use Only _____

Date Received: _____

Staff Initials: _____