ORANGE COUNTY PUBLIC LIBRARY
Request for Reconsideration of Library Materials

Author: _____

Title: _____

Publisher: _____

Format of material: (circle one) Book/Ebook Film Music

Reconsideration of material requested by:_____

Address: _____

Telephone: _____

1. I represent myself _____ or_____
   (Name) (Organization)

2. I have read the entire book. Yes_____ No_____

3. What portion of the material do you object to? Be specific and please cite pages.

   _____

   _____

   _____

4. Have you read professional reviews of the book? _____

5. What would you like your public library to do about this book? _____

   _____

   _____

_____ _____
(Date) (Signature of Requester)