



DECATUR PUBLIC LIBRARY

247 EAST NORTH STREET • DECATUR, ILLINOIS 62523-1128 • (217) 428-6617 • FAX (217) 423-5741

JOHN A. MOORMAN, City Librarian

REQUEST FOR CONSIDERATION TO PURCHASE

TYPE OF MATERIAL:

Book ___ Record ___ Film ___ Other _____

TITLE _____

AUTHOR _____

PUBLISHER & DATE, IF KNOWN _____

WHERE DID YOU HEAR ABOUT IT? _____

CITE RELATED REVIEWS, ADS, ETC. _____

YOUR NAME, ADDRESS AND PHONE NUMBER

Phone _____

Please inform me as to the library's decision to purchase this item.

YES ___ NO ___

PLEASE COMPLETE AND GIVE TO A LIBRARIAN.

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL

NAME _____

ADDRESS _____
City State Zip

TELEPHONE NUMBER _____

Author _____

Title _____

Type of Material _____

I have _____ have not _____ read/viewed the material in its entirety.

Specific nature of the complaint: _____

What do you believe is the theme or intent of the material? _____

_____ A copy of the Code of Library Policy - Material Selection and Collection Development has been made available to me.

_____ I am acquainted with the policy and believe this material fails to meet this policy because _____

_____ I agree that this material meets criteria currently established, but I would like the policy modified to exclude such material because _____

Date _____ Signature of Patron _____

Date _____ Received by Staff Member _____