

## Statement for Concern about Library Material(s)

DATE:_			
TITLE:_			
CALL N	IUMBER:AUTHOR	R:	
FORMA	AT:(Please	e specify: eg: Book, Magazine, DV	D, Compact Disc. etc.)
BARCO	DDE:	REQUESTED BY: (Please	
Print)_			
TELEPH	HONE:		
ADDRE	:SS:	CITY:	POSTAL
CODE:	BARCODE:	Do you represent	t yourself or a group:
SELF:_	GROUP: (Specify):		
1.	Did you read, view or listen to the entire work?		
	If not, which parts?		
2.	How was this item brought to your attention?		
3.	For whom do you think this work is intended?		
4.	What aspects of the material are you concerned about? (Please be specific):		
5.	What have reviewers said about this work?		
6.	What other venues do you suggest to provide information on this topic?		
	Signature		
	Please return the completed form to: Any desk at any Branch of the Thunder Bay Public Library.		
	Waverley Resource Library, 285 Red River Roa Brodie Resource Library, 216 S. Brodie Street Mary J. L. Black Branch Library, 901 S. Edward County Park Branch Library, County Fair Plaza	Street	