

**CITIZEN'S REQUEST FOR RECONSIDERATION
MCKINNEY PUBLIC LIBRARY**

Author: _____

Title: _____

Publisher (if known): _____

Request initiated by: _____

(please print)

Address: _____

Telephone: _____

Requester represents: himself, herself
(please circle one of the above or fill out below)

Organization: _____

(please designate)

Other group/person _____

(please designate)

1. How was this book (material) brought to your attention?

2. Did you read the entire book? (listen to/view material)?

3. What objections do you have to the book (material)?

Signature

Date

_____ Please check here if you wish to be contacted regarding the findings of this reconsideration.

Note: Individual titles will not be reconsidered more than once a year.