## **NEOSHO NEWTON COUNTY LIBRARY**

## STATEMENT OF CONCERN

We appreciate your concerns and welcome your comments. If you would like a written response, please include your name and address below.

What kind of material are you commenting on? (e.g. book, video, magazine)	
	ollowing information on this material:Author Publisher/Producer
Copyright date	Publisher/Producer
	at you find objectionable: (Please be specific, citing page numbers)
	red or listened to the entire work? Yes No
5. Would recommend t	his material for a different age group or location? If so, please specify.
6. Can you suggest other	er material to take its place?
6. What other commen	ts would you like to make?
Print your name	Phone
Address	
Your signature	Date
	MAIL TO: Director, Neosho Newton County Library 201 West Spring Street Neosho, Mo. 64850
FOR STAFF USE ONLY: STAFF MEMBER DIRECTOR	DATE REC'D. DATE REC'D.

DATE OF RESPONSE

DIRECTOR