

**PEASE PUBLIC LIBRARY**  
**REQUEST FOR RECONSIDERATION**

Author:

Title:

Requested by:

Name:

Address:

Telephone Number:

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If you represent an organization or group, please identify the name of the organization or group.

1. To what do you object? (Please be specific and cite pages if referencing a book)
  
2. Did you find anything of value in this material?
  
3. Did you read the entire book? If not, what parts did you read?
  
4. Have you read any published reviews of this material? If so, please list them.

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Signature of Requestor

Return to:  
Library Director  
Pease Public Library  
1 Russell Street  
Plymouth, NH 03264

Adopted by the Board of Trustees July 2, 2013.