Material Challenge Form

Please fill out completely and return to the Library	Director.	
Date:		
Name of complainant:		
Address:		
City:	State:	Zip code:
Phone number:		
Email:		
Butterfield Library card number:		
Are you making this challenge as an individual	? YES	NO
Or as the representative of an organization?	_ YES	NO
If you are speaking on behalf of an organization	on:	
Name of organization:		
Address:		
City: State:	Z	ip code:
Type of item you are challenging (fill out a ser	parate form for e	each item challenged):
• Book • Audio • Video • Magazine • Newspaper • 0	Computer progra	m • Other
Title:		
Author:		
Publisher/Distributor/Producer:		
Date of publication:		
What brought this item to your attention?		

Signature	Date
on this topic? (Use back of page and additi	ional page, if necessary.)
Can you suggest any materials to provi	ide additional information or other viewpoints
or scenes.	
To what specific aspects of the item do	o you object? Cite specific pages, passages,
page number, time into tape, or other ide	
	, viewed, or listened to? (List portions by
Have you read, viewed, or listened to this	is item in its entirety? YES NO