

*Your comments will receive a written reply within 30 days.*

## **Grace M. Pickens Public Library Customer Comment Form**

Date Submitted \_\_\_\_\_

Your Name and Telephone Number

\_\_\_\_\_

City, State Zip Code

\_\_\_\_\_

If you are acting as the official spokesperson for an organization, please specify:

\_\_\_\_\_

### **Library material on which you are commenting:**

Title \_\_\_\_\_

Author \_\_\_\_\_

Please comment on the material as a whole. Be specific about the matters which concern you.