APPENDIX B PATRON COMPLAINT FORM

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Please provide	a written statement of the	he incide	ent for which	n you would	like to make a	l
formal complain	nt, including the time, pla	ace and	person(s) ir	nvolved.		
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					_	
Your name:						
Address:						
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Phone number:						
Email address (optio	nal):					
Signature:						
Date:						
Date reviewed by the	e Library Employee in Charge:				_	
Signature: ———						
Date reviewed by the	e Regional Director:					
Signature:						