

**HOMER PUBLIC LIBRARY: FACILITIES COMPLAINT FORM**

---

**Patron's Information**

Name

---

Address

---

Phone or email

---

Patron's signature

Date

---

Comments or complaints

---

---

---

---

---

---

---

**Actions Taken by Library Staff**

---

---

---

---

---

---

---

Signature of library staff

Date

---

**Continued on reverse**

**Form Forwarded**

Date:
-------

<b>ADMINISTRATION</b>	<b>OTHER CITY OFFICES</b>	<b>BOARDS AND COMMISSIONS</b>
<input type="checkbox"/> City Manager	<input type="checkbox"/> City Clerks	<input type="checkbox"/> Americans with Disabilities Act (ADA)
<input type="checkbox"/> Communications	<input type="checkbox"/> Community Recreation	<input type="checkbox"/> Economic Development Commission (EDC)
<input type="checkbox"/> Human Resources	<input type="checkbox"/> Finance	<input type="checkbox"/> Library Advisory Board (LAB)
	<input type="checkbox"/> Fire	<input type="checkbox"/> Parks, Art, Recreation and Culture Advisory Commission (PARCAC)
	<input type="checkbox"/> IT	<input type="checkbox"/> Planning Commission
	<input type="checkbox"/> Planning	<input type="checkbox"/> Port and Harbor Commission
	<input type="checkbox"/> Police	
	<input type="checkbox"/> Port and Harbor	
	<input type="checkbox"/> Public Works	
	<input type="checkbox"/> Building Maintenance	
	<input type="checkbox"/> Parks	
	<input type="checkbox"/> Roads	
	<input type="checkbox"/> Water and Sewer	

Other

---