



LIBRARY BOARD PUBLIC AGENDA REQUEST FORM

No action will be taken relative to items on this agenda other than referral for information

Date of Request: _____

Date to Speak: _____

Name: _____

Address: _____ ZIP _____

Phone Number: _____

E-mail

Address: _____

Brief description of topic to be discussed:

Signature _____

Please return to:

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Wichita, KS 67203

Phone: (316) 261-8500

Fax: (316) 219-6320

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