Fine Dispute Form

Date: __________________________________________

Name: __________________________________________

Phone Number: ___________________ Email: ___________________

B Number: __________________________________________

Nature of the fine you are disputing (describe in full the issue with the fine):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature: ______________________________ Date: ___________________________

Office Use Only

☐ Print Screen of Unpaid Bills       ☐ Photocopy of Media Release Form

☐ Print Screen of Paid and Unpaid Bills       ☐ Media Checkout Print Screen (if available)

☐ Print Screen (s) of Item Information       ☐ Photocopy of Due Date Stamps in Items

☐ Print Screen of Checkouts       ☐ Other Documentation

Librarian Name: ______________________________ Date Submitted to Assistant Director: