Exhibit 1.A.

Willamalane Park and Recreation Public Records Request Form

To request to inspect or receive a copy of a Willamalane Park & Recreation District (“WPRD”) record, complete this form and submit it to: Willamalane Park and Recreation District, Attn: Public Records Officer, 250 S. 32nd Street, Springfield, OR 97477-6302 | E-mail: recordsrequest@willamalane.org | Phone: 541-736-4022 | Fax: 541-736-4043. The request should identify the requested records as specifically as possible. WPRD may request additional information or clarification from the requestor if necessary to expedite WPRD’s response to the request.

REQUEST SUBMITTED BY:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Firm/Company:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>City/State/Zip:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Fax:</td>
</tr>
</tbody>
</table>

REQUEST DETAILS:

I am interested in: [ ] inspecting [ ] obtaining a copy of the following WPRD records: (Clearly identify the requested records as specifically as possible).

[ ] I request an:

[ ] Electronic File
[ ] Hard Copy

**Inspection of public records:** Public records are available for inspection weekdays, between the hours of 9:00 a.m. and 4:00 p.m., excluding observed holidays. Please contact the Public Records Officer in advance to schedule an appointment. No person examining records may remove them from WPRD or write on them, fold them, or otherwise alter their appearance or order.

**Public records fees:** WPRD is authorized under public records laws to recover its costs of making records available including locating, retrieving, compiling and reviewing requested records, separating exempt material, supervising inspection of records, and duplicating, certifying and mailing records. Fees for search time may be charged regardless of whether WPRD is able to locate the requested records. Fees will be charged in accordance with WPRD’s Public Records Request Policy and Fee Schedule.

I have read and understand the above provisions, and by my signature, agree to abide by them.

Signed: ____________________________________________________________________________ Date: ____________________________________________________________________________