Exhibit A—Request for Records

In accordance with GBAA(LEGAL) and the Texas Public Information Act, I request that the following records of the District be made available to me as copies or for my inspection. I agree to pay the duplication costs if the cost does not exceed \$40. I understand that if the cost will exceed \$40, I will receive an estimate of charges and will have the opportunity to modify or withdraw my request before any copies are made.

(check appropriate box)

Inspecti only	on Copies requested	Copy format (paper or electronic)	Number of copies requested	Public information requested (include description adequate to clarify request)
			THE PERSON NAMED IN COLUMN TO THE PE	
Name of	f person requestir	ng information: _		
Phone:				
Address				
City / Sta	ate / Zip:			
This con	npleted form shou	ıld be presented	to the Superin	tendent or designee.
From: S	Superintendent			
To: F	Principal or depart	ment head		
Date: _				
The Dist	rict received this	request for publi	c information o	n (date).
ly v		cuments attache		railable, please respond electronical- copies to this form and return the
	Request for Inspection : Please indicate the place, dates, and times the requested information will be available for inspection.			
☐ If th	nis information is r	not readily avails	shla plagga sh	and and audition

DATE ISSUED: 12/8/2017

UPDATE 55

GBAA(EXHIBIT)-RRM