ODOT FORM 324a		FUND	AGE	NCY ORDER NO		CL	AIM NO.	CLAIM OF:	Muskogee County Distric	t 3		
Rev. 06/2002 DEPARTMENT OF				345				Address:				
TRANSPORTATION		FOR AGENCY USE ONLY				City St. Zip			Muskogee, Ok. 74402			
Notarized Claim Form							FEI No.					
ACCC	ACCOUNT SUB-ACTIVITY			OBJECT CFDA		AN	AMOUNT 5,500.00		FOR			
						5,500.00		\$5,500.00 AGAINST Oklahoma Department of Transportation ASSIGNMENT WARRANT				
								I hereby assign this claim to (LOCATOR) NO. Brian, Terra, Gilbert and Amy Enkey and authorize the State Treasurer to issue a warrant in payment to said assignee.				
							a warrant in p Date:	ayment to said assignee.				
Enter the partial part	ryment ainst an	Partial Final No. No.		TOTAL	TOTAL AMOUNT \$5.500.00			laimant: Leane W. Pon				
encumbered order.					OSF- AU	IDITED BY		Claimant	~emyw.	any		
Receipt of Goods or Services Date												
DATE	PURCHASE		ITEM						UNIT	AMO	UNT	
OF DELIVERY	ORDER NUMBER	QUANTITY	UNIT		SCRIPTION			PRICE	74			
DATE			PAYMENT FOR:									
07/18/2022		J/P 33054										
		Muskogee County District No.3										
		Ash Creek										
	JP# 33054											
	Diela a Wes A costa War											
	Right-of-Way Acquisition											
				Parcel 1					\$4,000.00			
				Parcel 2					\$1,500.00			
(*)				To be paid ou	5 CIRB AC	CCOUNT		Total	\$5,500.00			
The undersigned of	The undersigned contractor or duly authorized agent, of lawful age, being first duly sworn, on oath says that this claim Approval											
is true and correct. Affiant states that the work, services or materials as shown by this claim have been completed or										£5 500 00		
Supplied in accordance with plans, specifications, orders, requests and an other terms of the contract.										\$5,500.00		
states that (s)he is the duly authorized agent of the contractor for the purpose of certifying the facts pertaining to the giving of things of value to government personnel in order to procure the contract or obtain payment; (s)he is fully aware												
				he contract and has been person			,				\$5,500.00	
				ct and the filing of this claim; an				Approval	1. 11	6		
				een paid, given or donated or a oney or other thing of value, eith			'	\$5,500.00				
in procuring the co			ia any in	one, an outer time, and an outer, and	,	,,		Approva!	A			
Subscribed and												
Sworn before me												
Date Commission								Approval				
State of												
								Approval				
My Commission Expires Date Notary Public (or Clerk or Judge)												
				T Accounting Distribution Amount Object Encumbrance			Encumbrance		APPR	OVAL		
ODOT Acct.	Job Piece	Item	Part.	Amount	1	oject E	Encumbrance	APPROVAL I hereby approve this claim for payment and certify it				
									complies with the purcha	sing laws of this Sta	te.	
	33054			5,500.00								
							1					
							Agency's Approving Officer					
									Director		Date	
		1	Total	\$5,500.00								