

ODOT FORM 324a Rev. 06/2002 DEPARTMENT OF TRANSPORTATION Notarized Claim Form	FUND	AGENCY	ORDER NO.	CLAIM NO.	CLAIM OF: Oklahoma County, Oklahoma																					
		345																								
	FOR AGENCY USE ONLY																									
ACCOUNT	SUB-ACTIVITY		OBJECT	CFDA	AMOUNT	FEI No.																				
Enter the partial payment or final payment number if claim is to be charged against an encumbered order.			Partial No.	Final No.	TOTAL AMOUNT	FOR <div>\$750.00</div> AGAINST Oklahoma Department of Transportation ASSIGNMENT I hereby assign this claim to Kevin D. Rutledge and Caroline J. Rutledge and authorize the State Treasurer to issue a warrant in payment to said assignee. Date: _____ Claimant: _____ Brian Maughn, Oklahoma County Commissioner, District 2																				
					OSF- AUDITED BY																					
Receipt of Goods or Services Date																										
DATE OF DELIVERY	PURCHASE ORDER NUMBER	ITEM			UNIT PRICE	AMOUNT																				
		QUANTITY	UNIT	DESCRIPTION																						
2025				Payment for: Parcel 10 - 0 .10 Acres of Perpetual Utility Easement Payment Includes ANY and ALL Damages. Project: J2-8718(005)RB Job Piece: 28718(05) County: Oklahoma Parcel: 10		\$750.00																				
The undersigned contractor or duly authorized agent, of lawful age, being first duly sworn, on oath says that this claim is true and correct. Affiant states that the work, services or materials as shown by this claim have been completed or supplied in accordance with plans, specifications, orders, requests and all other terms of the contract. Affiant further 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 of the facts and circumstances surrounding the making of the contract and has been personally and directly involved in the proceedings leading to the procurement of the contract and the filing of this claim; and, neither the contractor nor anyone subject to the contractor's direction or control has been paid, given or donated or agreed to pay, give or donate to any officer or employee of the State of Oklahoma any money or other thing of value, either directly or indirectly, in procuring the contract or obtaining payment. Subscribed and Sworn before me on _____ Date _____ State of _____ Oklahoma County of _____ Oklahoma Commission Number _____ My Commission Expires _____ Date _____ Notary Public (or Clerk or Judge) ODOT Accounting Distribution <table><tr><td>ODOT Acct.</td><td>Job Piece</td><td>Item</td><td>Part.</td><td>Amount</td><td>Object</td><td>Encumbrance</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4">Total</td><td></td><td></td><td></td></tr></table>					ODOT Acct.	Job Piece	Item	Part.	Amount	Object	Encumbrance								Total							Approval Joe Blough, District 1 \$750.00 Approval Brian Maughn, District 2 \$750.00 Approval Myles Davidson, District 3 \$750.00 Approval APPROVAL I hereby approve this claim for payment and certify it complies with the purchasing laws of this State. Agency's Approving Officer Director Date
					ODOT Acct.	Job Piece	Item	Part.	Amount	Object	Encumbrance															
					Total																					