



CLAIM OR INVOICE AFFIDAVIT

STATE OF _____)

_____)

COUNTY OF _____)

SS:

The undersigned (architect, contractor, supplier, engineer, or supervisory official), of lawful age, being first duly sworn, on oath says that this invoice, claim or contract is true and correct. The affidavit further states that the work, services, or materials as shown by this invoice or claim have been completed or supplied in accordance with the plans, specifications, orders, or requests furnished to the affiant. Affiant further states that (s)he has made no payment, given or donated or agreed to pay, give or donate either directly or indirectly to any elected official, officer or employee of the State of Oklahoma, money or any other thing of value to obtain payment of the award of the contract.

Invoice Number

Invoice Amount

Signature - Architect, Contractor, Supplier, Engineer, or
Supervisory Official

Company Name (Print or Type)

Address

City, State, Zip Code

Subscribed and sworn to before me this _____ day of _____, 20_____.

_____, Notary Public

My commission Expires: _____