CLAIM DOCUMENT

SWODA RURAL ECONOMIC ACTION PLAN

P.O. BOX 569 BURNS FLAT, OKLAHOMA 73624 580.562.5009

Contract #: 23-GR-23047 CLAIM SUBMISSION FORM (Please list each claim; separately) DATE DETAILED DESCRIPTION OF ITEMS OF SERVICES Payment to Myers Engineering for Resident Project Representative Services Invoice No. 223009-10 ***Note: Copies of vendor invoices itemized on this claim form must be attached. *** This claim serves as a request for reimbursement of grant funds. REAP Award: \$133,950.00 REAP amount remaining after claim: \$24,657.05 I hereby certify that the equipment purchased and/or the services provided was in accordance with the terms and condition of the above referencement, applicable federal, state, and local laws, and further state that the two services, or materials) as shown by this imoice or claim have been (completed or supplied) in accordance with the plans, specifications, order quests for mister state that the above referencement and potential with the state state that the five services or materials as shown by this imoice or claim have been (completed or supplied) in accordance with the plans, specifications, order quests for mister state that the above expertitive state (s) he has made no payment directly or indirectly or on elected effect or order plans, specifications, order the contract or purchase order pursuant to which an invoice is required. Date: Date: POR OFFICE USE ONLY Approved by: Amount Authorized: Check #: Amount Authorized: Check #:			County: Greer				
CLAIM SUBMISSION FORM (Please list each claim separately) DATE DETAILED DESCRIPTION OF ITEMS OF SERVICES 7-29-2025 Payment to Myers Engineering for Resident Project Representative Services Invoice No. 223009-10 ****Note: Copies of vendor invoices itemized on this claim form must be attached. *** This claim serves as a request for reimbursement of grant funds. REAP Award: \$133,950.00 REAP amount remaining after claim: \$24,657.05 Ihereby certify that the equipment purchased and/or the services provided was in accordance with the terms and condition of the above refere contract, applicable federal, state, and local laws, and further state that the chove expenditures have been agrowed by the grantee's governing body. Afflant further states that the form sequents furnished by the afflant Afflant further states that of the Name been (completed or supplied) in accordance with the letters of contract. I further state that the above expenditures have been agrowed by the grantee's governing body. Afflant further states that the forms of the contract or purchase order pursuant to which an invoice is required. Date: Date: 2025 Signature of Authorized Official Print Name/Title Jackie Menasco, Mayor	Project: Wastewater Lagoon Improvements		Contact Person: Steve Kyle, City Clerk				
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Myers Engineering, Consulting Engineers, Inc.

13911 Quail Pointe Drive Oklahoma City, OK 73134, United States Tel: 405-755-5325 Fax: 405-755-5373 www.mecokc.com

City of Mangum 200 N. Oklahoma Mangum, Oklahoma 73554

INVOICE

INVOICE DATE: 7/28/2025 INVOICE NO: 223009-10 BILLING FROM: 6/25/2025 BILLING TO: 7/27/2025

223009 - Mangum - Sanitary Sewer Main and Wastewater Treatment Plant Upgrade

Managed By: Bill Myers

DESCRIPTION		CONTRACT AMOUNT	% COMPLETE	BILLED TO DATE	PREVIOUSLY BILLED	CURRENT AMOUNT
223009 Resident Project Representative Services		\$28,000.00	90.00	\$25,200.00	\$0.00	\$25,200.00
	TOTAL	\$28,000.00		\$25,200.00	\$0.00	\$25,200.00

AMOUNT DUE THIS INVOICE \$

\$25,200.00

This invoice is due upon receipt

SECTION 01027

S.A. &l. 427 (1985)

AFFIDAVIT FOR PAYMENTS IN EXCESS OF \$1,000.00

STATE OF OKLAHOMA)
) SS
COUNTY OF OKLAHOMA)

The undersigned (architect, contractor, supplier or engineer), of lawful age, being first duly sworn, on oath says that this invoice or claim is true and correct. Affiant 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 request furnished the affant. Affiant further states that (s)he has made no payment directly or indirectly to any elected official, officer or employee of the State of Oklahoma, any county or local subdivision of the state, of money or any other thing of value to obtain payment.

(Architect, contractor, supplier or engineer)

Subscribed and sworn to before me this July

July___ day of

28th _ 202

22001444 EXP. 01/31/20

MINIMUM INTERNAL

EXP. 01/31/28

Note:

Copy of this Affidavit must be attached to any invoice submitted by an architect, contractor, Engineer or supplier of material in excess of \$1000.00, as required by 74.0.5. 1984, 5.3109