|  |  |  |
| --- | --- | --- |
| **2-color seal** | State of OklahomaOffice of Management and Enterprise Services**Division of Capital Assets Management**Construction and Properties | Invoice Affidavit for Construction(For Minor Projects under the Statutory Amount or No Design Consultant) |

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Progress Payment | Date of Progress Invoice: |       |
| [ ]  | Final Payment | Date of Final Invoice: |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| STATE OF  |  | ) |  | Project Name: |  |
|  |  | ) | ss |
| COUNTY OF |  | ) |  | CAP Project No.: |  |

|  |  |
| --- | --- |
| **Contractor Or Supplier – Complete This Section** | (Choose Appropriate Option) |

[ ]  Option 1: Contract Award is Less than $50,000 and Affidavit Provided in lieu of Statutory Bonds

Affidavit: The undersigned Contractor or Supplier hereby affirms under oath that to the best of my knowledge, information and belief, the Work or Materials covered by this Invoice for Payment has been completed or materials delivered in accordance with the Contract Documents, that all amounts have been paid by the Contractor or Supplier for Work or Materials for which previous Invoices for Payment, if any, were issued and payments received from the Owner, and that current payment shown herein is now due. In accordance with 61O.S., § 1.(C), the Contractor acknowledges that the execution of this affidavit with knowledge that any of the contents of the affidavit are false, upon conviction, shall constitute perjury, punishable as provided for by law.

[ ]  Option 2: Contract Award is Greater than $50,000 and Statutory Bonds have been provided

Certification: The undersigned Contractor or Supplier hereby certifies that to the best of my knowledge, information and belief, the Work or Materials covered by this Invoice for Payment has been completed or materials delivered in accordance with the Contract Documents, that all amounts have been paid by the Contractor or Supplier for Work or Materials for which previous Invoices for Payment, if any, were issued and payments received from the Owner, and that current payment shown herein is now due.

|  |  |  |
| --- | --- | --- |
|       |  |       |
| *(Company Printed Name)* |  | *(Authorized Representative Printed Name)* |
|  |  |  |
|  |  |  |
| *(Authorized Representative Printed Title)* |  | *(Authorized Representative Signature)* |

**(NOTARIZE ONLY IF OPTION 1 ABOVE IS CHECKED)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Subscribed and sworn to (or affirmed) before me on |  | day of |  | , 20 |  |
|  |  |
|  |
| *(Signature of notarial officer)* |
|  |
| My Commission Expires: |  |
| *(Seal)* | My Commission #: |  |

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Certification Of Supervisory Official** | (Owner’s Representative) |

In accordance with the Contract Documents, based on on-site observations and the data comprising the Invoice for Payment, the Supervisory Official certifies to the Owner that to the best of the Supervisory Official’s knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the Amount Certified. Attach Copy of Approved Invoice.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |  |  |
| --- | --- | --- |
|       |  |  |
| *(Using Agency Name)* |  | *(Authorized Representative Signature)* |
|       |  |  |  |  |
| *(Representative Printed Name)* |  | *(Representative Title)* |  | *(Date)* |

 |

If this Affidavit is for Final Payment, forward one copy with final Invoice to DCAM/CAP to close out project.