S. A. & I. 2742 (2000)

PAY ROLL CLAIM

PAY-ROLL CLAIM No. _____

To the Governing Board of _____ County, Oklahoma. _____ Oklahoma, _____, _____

By Affidavit under oath, the Pay Roll of REGULAR PERSONNEL of _____
(Name of Dept., Office, Sub-Office, Station, etc.)

is hereby certified to you for your consideration, covering the REGULAR pay-period fixed and established, of _____ beginning _____, _____
(State Period fixed)

and ending _____, _____, as follows, to-wit:

NAME / Address	Nature of Work / Period Claimed If Less Than Full Payroll Period	Rate of Pay	Gross Amount Due	ALLOWANCE BY ACTION OF GOVERNING BOARD: Amount Allowed	Deductions: Federal Tax	State Tax	O.A.S.I.	Retmt	Ins.	Savings	Amount of Warrant,	No.	Signature of Employee if required By Governing Board

On _____
(Name of Municipality)

For _____
(Name of Department, Office, Sub-Office, etc.)

By _____
(Person in Charge)

_____ Tif

Filed _____, _____

ACTION BY THE GOVERNING BOARD

Considered on _____, _____

and allowed for _____ Person
(Words, not figures)

Total Claimed _____ $_____

Amount Disallowed _____ $_____

Totals Allowed, and Charged to:

Acct. No.	Title of Account	Amount

Allowed Total $_____

And Credit:

Warrants Issued _____ $_____

Federal Tax _____ $_____

State Tax _____ $_____

O.A.S.I. _____ $_____

Retirement _____ $_____

Insurance _____ $_____

Savings _____ $_____

Total Cr. _____

Separate Encumbrance for O.A.S.I. obligation of Municipality

Charge Appr'n Acct. and Credit Reserve

Appr'n Account No.	Reserve Acct. No.	Amount

At a Lawful Meeting of the Governing Board

on _____, _____

BY ORDER OF THE BOARD:

_____ Chairman
(Chairman, Co. Commissioners, Town Board, or Mayor, etc.)

_____ Member

_____ Member

NOTE.
All County Claims must be signed by at least two members of the Board (19Okl.St.Ann. §410.8)

NOTE.
Any assignment of salary must be by separate instrument.
(See 62 Okl.St.Ann. §§304.1 and 304.2)

STATE OF OKLAHOMA, County of _____ ss: AFFIDAVIT

L the undersigned, on oath, depose and say that lam _____ of _____ of _____
(Official Title) (Department or Agency) (Municipal Subdivision)

State of Oklahoma, and I am authorized to execute this affidavit by virtue of 62 0kl.St.Ann. § 304.1; that the persons whose names are listed on the above pay roll hold the positions or employment set forth after their respective names in the department that I am in charge of; that the appointment or employment of each said persons has heretofore been confirmed by the Governing Board and filed or entered of record by virtue of statute, ordinance, or contract; that each of said persons personally performed under my direct supervision the services for 1 which compensation is claimed.

I further depose and say the foregoing pay roll is correct, that the several amounts claimed are correct, just, due and unpaid; and that the aggregate amount approved by me for payment is _____

_____ Payable to _____ persons, which said amount is subject to the withholding of any taxes, or other deductions prescribed by law.
(Insert words, not figures)

The approving officer further certifies that he has taken and filed the oath or affirmation required by 51 0kl.St.Ann. §§ 36.1-36.6, and said approving officer also certifies that every other officer or employee whose name appears on said payroll has notified him in writing that he has taken and filed said oath or affirmation.

Subscribed and sworn to Before me this _____ day

of _____ _____

My Commission Expires _____

_____
Name of head of Department, Offices, Sub-Office, Institution orSchool

_____ Title

_____
Notary Public or Municipal Clerk