

PAYMENT AUTHORIZATION FORM

FINANCE DEPARTMENT USE ONLY

CHECK # _____

CHECK DATE _____

COLOR PAPER IS REQUIRED IF YOU ARE REQUESTING FOR THE CHECK TO BE RETURNED TO YOUR DEPARTMENT:

VENDOR NAME: ADG

DESCRIPTION/JUSTIFICATION: Payment #2 - Downtown Overlay District

VENDOR#: _____

EXPENSE ACCOUNT NUMBER	PROJECT NUMBER	INVOICE NUMBER	AMOUNT
<u>030-1700-419.70-17</u>	_____	<u>13957</u>	<u>6,650.00</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL			<u>\$ 6,650.00</u>

I hereby authorize the payment of the following services/items for which funds are budgeted in the accounts indicated. I believe this to be a true and accurate record of the amount owed.

Initiated By:

DJ Limon, Admin Asst.
NAME

Approved By:

Farhad K. Darojs
DIVISION/DEPARTMENT HEAD

DATE: MAR. 13, 2017

Expense Accounts Verified By and Approved for inclusion on Claims List:

FINANCE DEPARTMENT

DATE: _____



ADG, PC
 920 W Main
 OKlahoma City, OK 73106
 405.232.5700 ■ www.adgokc.com

City of Broken Arrow
 Michael Skates
 P. O. Box 610
 Broken Arrow, OK 74012

Invoice number 13957
 Date 02/08/2017

Project **16-054 BROKEN ARROW URBAN PLANNING**

For Services Rendered up to: January 31, 2017

FOR PROFESSIONAL SERVICES RENDERED TO THE FOLLOWING PROJECT:

Invoice Summary

Description	Contract Amount	Percent Complete	Prior Billed	Total Billed	Current Billed
Phase One: Kick-Off and Engagement (6weeks) 30%	28,500.00	100.00	28,500.00	28,500.00	0.00
Phase Two: Creation of Preferred Character Managment Tool (8 weeks) 20%	19,000.00	35.00	0.00	6,650.00	6,650.00
Phase Three: Public Review of Draft Management Tool (8 weeks) 30%	28,500.00	0.00	0.00	0.00	0.00
Phase Four: Adoption Hearings and Final Deliverables (10 weeks) 20%	19,000.00	0.00	0.00	0.00	0.00
Additional Services	0.00	0.00	0.00	0.00	0.00
Expenses	0.00	0.00	81.70	81.70	0.00
Total	95,000.00	37.09	28,581.70	35,231.70	6,650.00

Expenses

	Billed Amount
Reproduction Triangle A&E, Inc.	0.00
Travel Leslie L. Tabor	0.00
Office Supplies Leslie L. Tabor	0.00
Meals Leslie L. Tabor	0.00
Expenses subtotal	0.00

Current Invoice total **6,650.00**

Aging Summary

Invoice Number	Invoice Date	Outstanding	Current	Over 30	Over 60	Over 90	Over 120
13858	12/22/2016	28,581.70		28,581.70			
13957	02/08/2017	6,650.00	6,650.00				
	Total	35,231.70	6,650.00	28,581.70	0.00	0.00	0.00