



By your signature on this letter, you have accepted the City's offer of \$68,380.00. Please return this document in the self-addressed-stamped envelope for further processing. Please contact Karen Pax if you have any questions about this offer. Her direct number is 918-576-4506, or 918-259-7000 ext. 5435. Please respond within ten (10) days of receipt of this letter.

Respectfully,
CITY OF BROKEN ARROW

Michael L. Spurgeon
City Manager

MLS/klp
enc

Jose L. Godinez

Tracy Layne Godinez





CONDITIONS AND REQUEST FOR PAYMENT

Conditions: (List physical conditions required for acceptance):

Fee Simple

Terms for Payment:

Owner's request for payment in the amount of: \$68,380.00

Owner's Mailing Address:

Owner Requests Check:

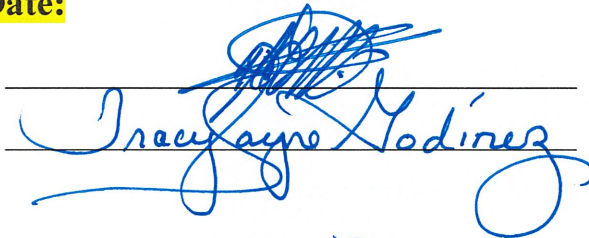
- ☐ Mailed to above address by Certified Mail
- ☐ Mailed to above address
- ☒ Call me and I will pick it up
- ☒ Delivered by Agent

Check Payable to:

Jose I. and/or Tracy L. Godínez

Signature/Date:

Owner/s:



Date:

8/20/2025

Agent:

Karen L. Pax

Date:

8/20/25

Project:

ST23280 9th St: New Orleans-Washington Parcel 25