



Department of Finance
723 S. Lewis Street/P.O. Box 1449

Office: 405-742-8242
Web: Stillwater.org

**Noncollusion Affidavit
(For invoice payment over \$25,000)**

Date: _____

Vendor Name: _____

Vendor Address: _____

City: _____ State: _____ Zip: _____

Description

Invoice Number: _____ Invoice Date: _____

Item purchased or service provided: _____

The undersigned person, of lawful age, being first duly sworn, on oath says that this invoice is true and correct and is authorized to submit the invoice pursuant to a contract or purchase order. Affiant further states that the work, service or materials as shown by this invoice have been supplied or completed in accordance with the plans, specifications, orders, requests, or contract furnished or executed by the affiant. Affiant further states that he/she has made no payment directly or indirectly to any elected official, officer or employee of the City of Stillwater or money or any other thing of value to obtain payment of the invoice or procure the contract or purchase order pursuant to which an invoice is submitted.

Contractor, supplier, engineer, architects

Subscribed and sworn to before me

this day of , 20

Notary Public (or Officer having Power to Administer Oaths)