

ALBERT ASHWOOD  
STATE DIRECTOR



MARY FALLIN  
GOVERNOR

STATE OF OKLAHOMA  
DEPARTMENT OF EMERGENCY MANAGEMENT

RE: Public Assistance Grant Funding Documents for **FEMA-1883-DR-OK**

Dear Applicant,

Enclosed please find your check for the State share of the **Severe Winter Storm, (FEMA-1883-DR-OK)** that was declared on 03/05/2010. We have also enclosed an additional copy of the check, a 90-91 explaining your scope of work and cost associated with each PW and an OEM Form 15A which identifies the project worksheet number and the corresponding State share at 12.5%.

If you have questions or require additional information, please contact Albert Ashwood at (405) 521-2481 or via e-mail at [albert.ashwood@oem.ok.gov](mailto:albert.ashwood@oem.ok.gov). You may also contact Mike Teague at (405) 219-2090 or via e-mail at [michael.teague@oem.ok.gov](mailto:michael.teague@oem.ok.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Ashwood", written over a horizontal line.

ALBERT ASHWOOD  
Director



07/30/2012

309 DEPARTMENT OF CIVIL EMERGENCY MANAGEMEN Warrant No 106266575

Account/ Invoice Number

Inv Date

Invoice Amt

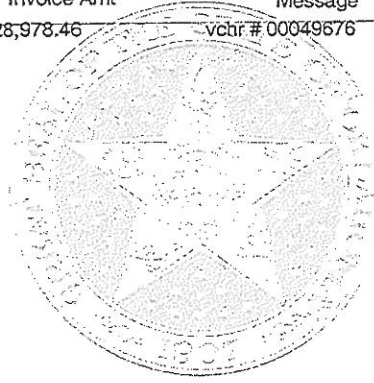
Message

PA 1883 PW386 #2428 SP

2012/07/09

28,978.46

vchr # 00049876



THE BACK OF THIS DOCUMENT CONTAINS A WATERMARK. HOLD AT AN ANGLE TO VIEW.



STATE OF OKLAHOMA  
STATE TREASURY, OKLAHOMA CITY

309 DEPARTMENT OF CIVIL EMERGENCY MANAGEMEN

WARRANT#

106266575

DATE ISSUED

07/30/2012

TO THE STATE TREASURER

PAY TO THE ORDER OF *Twenty eight thousand nine hundred seventy eight and 46/100 Dollars*

\*\*\*\*\*\$28,978.46

VOID AFTER 90 DAYS



CITY OF NORMAN  
415 E MAIN  
NORMAN, OK 73071-5820

KEN MILLER  
STATE TREASURER

106266575 103000855 7925467

OSF - AUDITED BY:

|  |                                    |                            |                      |                   |             |
|--|------------------------------------|----------------------------|----------------------|-------------------|-------------|
| CLAIM OF:  | CITY OF NORMAN                     | 28,978.46                  | 30900                | 00049676          | Not Paid    |
| Address:   | 415 E MAIN; NORMAN, OK, 73071-5820 | TOTAL CLAIM AMOUNT         | AGENCY BUSINESS UNIT | CLAIM VOUCHER NO. | WARRANT NO. |
| Alt Name:  |                                    | VOUCHER DATE: July/24/2012 |                      | Warrant Dt:       |             |
| Vend I.D.:   | 0000076924 LOC: 0007               | Agency Board, Comm., Dept: |                      |                   |             |
| ASSIGNMENT SECTION   |                                    | Civil Emergency Management |                      |                   |             |
| ASSIGNEE: _____  |                                    |                            |                      |                   |             |
| Address: _____   |                                    |                            |                      |                   |             |
| Alt Name _____   |                                    |                            |                      |                   |             |
| Vend I.D.: _____ LOC: _____  |                                    |                            |                      |                   |             |
| I hereby assign this claim to the above assignee and authorize the State Treasurer to issue a warrant in payment to said assignee. |                                    |                            |                      |                   |             |
|  |                                    | Claimant                   |                      | Date              |             |

I hereby approve this claim for  
payment and certify it complies  
with the purchasing laws of  
this State.

*Jack W. Pesnell*  
Agency Approving Officer's Signature

Approving Officer's Name: JACK W PESNELL

Title: COMPTROLLER Date: 7/25/2012



00049676

## OKLAHOMA DEPARTMENT OF EMERGENCY MANAGEMENT (OEM)

## PUBLIC ASSISTANCE

## REQUEST FOR ADVANCE OR REIMBURSEMENT PAYMENT

|                 |                |        |          |                           |
|-----------------|----------------|--------|----------|---------------------------|
| NORMAN, CITY OF |                |        |          | DR Type                   |
| DEPARTMENT      | OBJECT ACCOUNT | CFDA#  | Batch #  | WINTER STORM JANUARY 2010 |
| 95- 1883 -3     | 554120         | 97.036 | 1883-S13 |                           |

|                    |                           |                    |                    |
|--------------------|---------------------------|--------------------|--------------------|
| VENDOR ID<br>76924 | LOCATION<br>#7            | Voucher #<br>49676 | DUNS NUMBER        |
| Tax ID/EIN         | FIPS CODE<br>027-52500-00 | Bundle#:<br>S      | Prepared by<br>Lac |

|   |  |
|---|--|
| APPLICANT<br>NORMAN, CITY OF<br>415 E MAIN<br>NORMAN OK 73071 | PAYMENT OF STATE FUNDS FOR<br>NON-FEDERAL SHARE OF FEMA<br>GRANT PROJECTS INDICATED IN<br>THE BOX BELOW. |
|---|--|

COMPUTATION OF AMOUNT OF REIMBURSEMENT/ADVANCES REQUESTED 15 Alpha Large 424 Fund

|   |       |                 |             |
|---|-------|-----------------|-------------|
| REMARKS<br>PA: FEMA DR 1883 PW 386: CITY OF NORMAN  | Cat   | PW + Vsn        | 424 Fund    |
|   | B     | 1883-00386(0)-S | \$28,978.46 |
|   | Total |                 | \$28,978.46 |
| <p>I certify that to the best of my knowledge and belief the data above are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.</p> <p>SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL</p> <p><u>Michelann Ooten</u> 7/09/2012</p> <p>Michelann Ooten Date</p> <p>Deputy Director</p> <p>Telephone (405)521-2481</p> <p>I certify that the amount claimed on this voucher is correct and just and that payment has not been received.</p> <p><u>[Signature]</u> 7/09/2012</p> <p>Governor's Authorized Representative Date</p> |       |                 |             |

Supporting documentation is on file at the Oklahoma Emergency Management office and at the local payee.

07/30/2012

309 DEPARTMENT OF CIVIL EMERGENCY MANAGEMEN Warrant No 106266574

Account/ Invoice Number

Inv Date

Invoice Amt

Message

PA 1883 PW33-983 #2428 SP

2012/07/09

4,047.39

vchr # 00049675



THE BACK OF THIS DOCUMENT CONTAINS A WATERMARK. HOLD AT AN ANGLE TO VIEW.



STATE OF OKLAHOMA  
STATE TREASURY, OKLAHOMA CITY

39-85  
1030

309 DEPARTMENT OF CIVIL EMERGENCY MANAGEMEN

WARRANT#  
106266574  
DATE ISSUED  
07/30/2012

TO THE STATE TREASURER

PAY TO THE ORDER OF *Four thousand forty seven and 39/100 Dollars*

\*\*\*\*\*\$4,047.39

VOID AFTER 90 DAYS



CITY OF NORMAN  
415 E MAIN  
NORMAN, OK 73071-5820

KEN MILLER  
STATE TREASURER

106266574 103000855 7925467

OSF - AUDITED BY:

|  |                            |              |             |          |
|--|----------------------------|--------------|-------------|----------|
| CLAIM OF: CITY OF NORMAN   | 4,047.39                   | 30900        | 00049675    | Not Paid |
| Address: 415 E MAIN; NORMAN, OK, 73071-5820  | TOTAL                      | AGENCY       | CLAIM       | WARRANT  |
| Alt Name:  | CLAIM                      | BUSINESS     | VOUCHER     | NO.      |
| Vend I.D.: 0000076924 LOC: 0007  | AMOUNT                     | UNIT         | NO.         |          |
| ASSIGNMENT SECTION   | VOUCHER DATE:              | July/24/2012 | Warrant Dt: |          |
| ASSIGNEE:  | Agency Board, Comm., Dept: |              |             |          |
| Address:   | Civil Emergency Management |              |             |          |
| Alt Name   |                            |              |             |          |
| Vend I.D.: LOC:  |                            |              |             |          |
| I hereby assign this claim to the above assignee and authorize the State Treasurer to issue a warrant in payment to said assignee. |                            |              |             |          |
| Claimant   |                            | Date         |             |          |

I hereby approve this claim for payment and certify it complies with the purchasing laws of this State.

Date: 7/25/2012

00049675

# OKLAHOMA DEPARTMENT OF EMERGENCY MANAGEMENT (OEM)

## PUBLIC ASSISTANCE

### REQUEST FOR ADVANCE OR REIMBURSEMENT PAYMENT

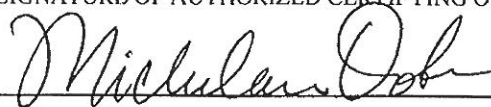
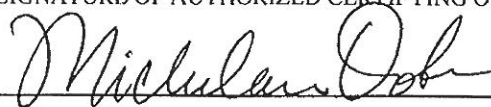
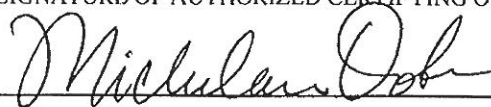
|                           |                          |                 |                     |                           |
|---------------------------|--------------------------|-----------------|---------------------|---------------------------|
| <b>NORMAN, CITY OF</b>    |                          |                 |                     | <b>DR Type</b>            |
| DEPARTMENT<br>95- 1883 -3 | OBJECT ACCOUNT<br>554120 | CFDA#<br>97.036 | Batch #<br>1883-S13 | WINTER STORM JANUARY 2010 |

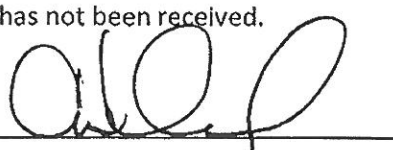
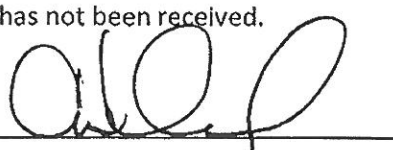
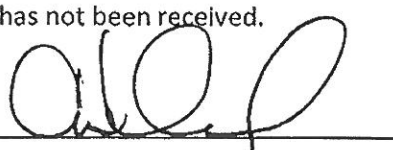
|                    |                           |                    |                    |
|--------------------|---------------------------|--------------------|--------------------|
| VENDOR ID<br>76924 | LOCATION<br>#7            | Voucher #<br>49675 | DUNS NUMBER        |
| Tax ID/EIN         | FIPS CODE<br>027-52500-00 | Bundle#:<br>S      | Prepared by<br>Loc |

|  |  |
|--|--|
| APPLICANT<br><b>NORMAN, CITY OF</b><br><b>415 E MAIN</b><br><b>NORMAN OK 73071</b> | PAYMENT OF STATE FUNDS FOR<br>NON-FEDERAL SHARE OF FEMA<br>GRANT PROJECTS INDICATED IN<br>THE BOX BELOW. |
|--|--|

|   |                         |
|---|-------------------------|
| COMPUTATION OF AMOUNT OF REIMBURSEMENT/ADVANCES REQUESTED | 15 Alpha Small 424 Fund |
|---|-------------------------|

| REMARKS<br>PA: FEMA DR 1883 PW 33, 550, 678, 714, 983, 162: CITY OF NORMAN | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Cat</th> <th style="width: 45%;">PW+Version</th> <th style="width: 50%;">424 Fund</th> </tr> </thead> <tbody> <tr> <td>A</td> <td>1883-00033(0)-S</td> <td>\$2,643.64</td> </tr> <tr> <td>E</td> <td>1883-00162(0)-S</td> <td>\$181.25</td> </tr> <tr> <td>B</td> <td>1883-00550(0)-S</td> <td>\$648.37</td> </tr> <tr> <td>B</td> <td>1883-00678(0)-S</td> <td>\$186.11</td> </tr> <tr> <td>B</td> <td>1883-00714(0)-S</td> <td>\$259.26</td> </tr> <tr> <td>B</td> <td>1883-00983(0)-S</td> <td>\$128.76</td> </tr> <tr> <td colspan="2" style="text-align: center;">Total</td> <td>\$4,047.39</td> </tr> </tbody> </table> | Cat        | PW+Version | 424 Fund | A | 1883-00033(0)-S | \$2,643.64 | E | 1883-00162(0)-S | \$181.25 | B | 1883-00550(0)-S | \$648.37 | B | 1883-00678(0)-S | \$186.11 | B | 1883-00714(0)-S | \$259.26 | B | 1883-00983(0)-S | \$128.76 | Total |  | \$4,047.39 |
|--|--|------------|------------|----------|---|-----------------|------------|---|-----------------|----------|---|-----------------|----------|---|-----------------|----------|---|-----------------|----------|---|-----------------|----------|-------|--|------------|
| Cat  | PW+Version   | 424 Fund   |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| A  | 1883-00033(0)-S  | \$2,643.64 |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| E  | 1883-00162(0)-S  | \$181.25   |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| B  | 1883-00550(0)-S  | \$648.37   |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| B  | 1883-00678(0)-S  | \$186.11   |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| B  | 1883-00714(0)-S  | \$259.26   |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| B  | 1883-00983(0)-S  | \$128.76   |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |
| Total  |  | \$4,047.39 |            |          |   |                 |            |   |                 |          |   |                 |          |   |                 |          |   |                 |          |   |                 |          |       |  |            |

|   |   |  |                   |
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| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL<br><br>Michelann Ooten<br>Deputy Director<br>Telephone (405)521-2481  | 7/09/2012<br>Date   |  |                   |

|   |  |   |                   |
|---|--|---|-------------------|
| I certify that the amount claimed on this voucher is correct and just and that payment has not been received.               | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> <br/>           Governor's Authorized Representative         </td> <td style="width: 40%; text-align: center;">           7/09/2012<br/>           Date         </td> </tr> </table> | <br>Governor's Authorized Representative | 7/09/2012<br>Date |
| <br>Governor's Authorized Representative | 7/09/2012<br>Date  |   |                   |