

## OFFICE OF JUVENILE AFFAIRS

### Request for Payment of Funds

Claim must be submitted to OJA ARPA email address at: [ARPA@oja.ok.gov](mailto:ARPA@oja.ok.gov). Full supporting documentation **must** accompany claim request. First claim for a specific contractor **MUST** have that contractor's ARPA Davis-Bacon Local Impact Report attached.

<b>SECTION I – REQUEST</b>		
1. NAME OF CONTRACTOR	3. CONTRACT AMOUNT	4. AMOUNT REQUESTED
ADDRESS	5. CONTRACT NUMBER	
CITY, STATE & ZIP	6. REQUEST NUMBER	
2. SEND WARRANT TO (IF DIFFERENT FROM CONTRACTOR)	7. PERIOD FUNDS REQUESTED (MM/DD/YY)	
ADDRESS	8. CONTACT PERSON (NAME AND TITLE)	
CITY, STATE & ZIP	9. CONTACT PERSON (PHONE)	

<b>SECTION II – STATUS OF FUNDS</b>	<b>AMOUNT</b>	<b>FOR OJA USE ONLY</b>
1. Contract Amount	\$	FUND:  DEPT:  PROG CODE:  CFDA:  OBJ. CODE:  ORDER NO.:  INVOICE NO:
2. Amount Received Before Today	\$	
3. Requested in Transit (not yet received)	\$	
4. Advancement Amount of this Request	\$	
5. Reimbursement Amount of this Request	\$	
6. Balance Remaining to Draw (1 minus sum of 2 thru 5)	\$	

<b>SECTION III-</b>
<p>I certify that this <i>Request for Funds</i> has been prepared in accordance with the terms and conditions of the OJA Contract cited, and that the amount requested is proper for payment to the Contractor or for credit to the account of the Contractor at the Contractor's bank. I also certify that the date reported above is correct. Failure to provide correct figures or to fully complete this form will require the return of this request and will cause a delay in funding.</p>
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> <p>_____ Signature of Authorized Official</p> </div> <div style="width: 15%;"> <p>_____ Date</p> </div> <div style="width: 50%;"> <p>_____ Print Name of Authorized Official</p> </div> </div> <div style="margin-top: 20px;"> <p>_____ Agency Name</p> </div>

<b>APPROVAL FOR OJA USE ONLY</b>
<p>_____ OJA Approval / DATE APPROVED</p>