

Payne County Board of Commissioners
Regular Meeting, December 5, 2016, 9:00 a.m.
Payne County Administration Building; 315 W. 6th Avenue
Gloria Hesser Commissioners' Meeting Room, Suite 200/201

AGENDA

- I. Meeting called to order by Chairman
- II Invocation and Flag Salute
- III. Minutes
 - A. Approval of November 29, 2016
- IV. Miscellaneous items from the Audience (no action will be taken)
- V. Discussion and Possible Action on Bid Openings- 9:30 A.M.
- VI. Discussion and Possible Action on Evaluations

- VII. Discussion and Possible Action on Reports from Officers and Boards
 - A. Approval of Bid on County Owned Property - Treasurer
 - B. OPERS United Health Care Contract for Subsidy with Payne County
 - C. Consideration of Engineer for Determining Road Weight Limits
 - 1. EST Road Study Proposal
 - D. Approval of Division Order with Shell Trading (US) Company for Nash #13-1 Lease
 - E. Request for Traffic Control Signs
 - F. Ingress and Egress Agreements
 - 1. Dale Caldwell - D3
 - 2. Raleigh & Betty Jobses - D3
 - 3. Rick & Melissa Davenport - D3
 - G. Removal of Equipment Items from Inventory
 - H. Appointment of Requisitioning and Receiving Officers

- VIII. Discussion and Possible Action on Financials
 - A. Cash Appropriations
 - B. Transfer of Appropriations
 - C. Purchase Orders: List of the purchase orders will be available at the meeting, or from the County Clerk
 - 1. New
 - 2. Blanket
 - 3. Tabled
 - 4. Disallowed
 - 5. Payroll/Longevity
 - D. Monthly Reports of Officers

- IX. Discussion and Possible Action on
 - A. Telephone and Utility Permits
 - B. Road Crossing

- X. Public Announcements from the Board (no action will be taken)

- XI. New Business
- XII. Adjournment

PAYNE COUNTY
GLENN CRAIG
COUNTY CLERK

2016 DEC - 1 P 3: 34

VII.A.

S.A. & I. 248 (2002)

COUNTY TREASURER'S TRANSCRIPT OF PROCEEDINGS
ON SALE OF COUNTY PROPERTY ACQUIRED AT RESALE FOR
APPROVAL OF THE BOARD OF COUNTY COMMISSIONERS

To the Honorable Board of County Commissioners,
PAYNE County, State of Oklahoma:

I, the undersigned County Treasurer, herewith tender my report of sale to SAMMY REECE of the following described tract, parcel or lot of land, situated within said County and State, and hitherto acquired by the County at Resale, to-wit:

NORTH ADD BLK 1 LOTS 16-17

The proceedings had thus far toward consummation of said sale have been as follows:

1. On SEPTEMBER 20, 2016, an offer was made by TRISTEN D. STACKS to purchase the above described property from the County for the sum of \$25.00.
2. On receipt of said bid, I caused notice to be given by publication in the STILLWATER NEWSPRESS, CUSHING CITIZEN, PERKINS JOURNAL, YALE PHOENIX newspapers, published at EACH RESPECTIVE CITY, within said County and State, which notice was published once a week for three consecutive weeks preceding the sale, as follows: (1) NOVEMBER 12, 2016; (2) NOVEMBER 16, 2016; (3) NOVEMBER 20, 2016; a copy of which notice and proof of publication is hereto attached disclosing the foregoing description of the property, the amount bid therefor in addition to all costs, the name of the bidder, the date set for the proposed sale, a statement that said property would be sold at such price and to such bidder on the date specified, subject to approval by the Board of County Commissioners, unless higher bids were received on such date, and that the terms of sale were strictly for cash in hand.
3. On the 22 DAY OF NOVEMBER, 2016, the same being the date specified in said notice, I announced that the foregoing described property was about to be sold and would be sold to the highest competitive bidder for cash in hand or to the original bidder if there be no higher price offered, whereupon, including the bid and bidder named in the published notice, the following bids were submitted:
 - (a) By TRISTEN STACKS for the sum of \$25.00
 - (b) By SAMMY REECE for the sum of \$30.00
 - (c) By _____ for the sum of _____
4. No further bids being offered, it was ascertained that
 - (a) SAMMY REECE had offered the highest competitive bid.
 - (b) That the highest competitive bid was in the sum of \$30.00
 - (c) That the additional and separate charge for apportioned cost was \$67.10
 - (d) That the total to be paid, including deed, was the sum of \$97.10
5. Receipt is hereby acknowledged from SAMMY REECE of the sum of NINETY SEVEN DOLLARS AND TEN CENTS, \$97.10, the same being tender in full of the foregoing total bid and apportioned costs and the same has been deposited in the County Treasurer's Depository Account pending approval of sale and issuance of deed.
6. Sale of the foregoing described property was declared made to SAMMY REECE the foregoing highest bidder subject to approval of the Board of County Commissioners, at its discretion.

NOW, I, respectfully present this transcript of proceedings, attached to all papers, bids, and proofs relating to said sale for your approval of the sale herein made, and for your order directing the Chairman of your Board to consummate said sale by executing a deed conveying the above described property in as full and complete a manner as the County is empowered to do, to the person hereinbefore named as the highest competitive bidder for said property.

Signed at STILLWATER, Oklahoma this 22 DAY OF NOVEMBER, 2016.



Carla Manning
County Treasurer

ORDER OF BOARD OF COUNTY COMMISSIONERS RELATING
TO THE SALE OF COUNTY PROPERTY ACQUIRED AT RESALE

WHEREAS, the County Treasurer has presented to this Board the forgoing transcript of all her proceedings in said sale, with all papers and proofs relating to said sale, for the approval of this Board of County Commissioners, and

This Board of County Commissioners being convened in the office of the County Clerk of said County and State on the date hereinafter set forth.

WE HAVE CAREFULLY EXAMINED said transcript and proceedings, and find:

That _____

THEREFORE, so finding, the Board of County Commissioners of _____ County, State of Oklahoma, does hereby order and direct that the foregoing sale be _____ approved; and the Chairman of said Board of County Commissioners is hereby ordered and directed to EXECUTE A DEED conveying the foregoing described property to _____ in as full and complete a manner as the County is authorized to convey it; and the County Treasurer is ordered and directed, upon the execution of said Deed to pay into the proper funds and accounts the monies heretofore received by her in consideration thereof.

Done at _____, Oklahoma, this _____ day of _____, 20____.

BY ORDER OF THE BOARD OF COMMISSIONERS OF

County, State of Oklahoma

Chairman

Member

Member

(SEAL)
ATTEST:

County Clerk

COUNTY DEED

PROPERTY ACQUIRED AT RESALE

KNOW ALL MEN BY THESE PRESENTS, That,

WHEREAS, PAYNE County, State of Oklahoma, acquired title to the hereinafter described tract, parcel, or lot of land for delinquent taxes, interest, penalties and costs in full compliance with and by operation of the assessment, levy sale and resale laws of the State of Oklahoma; and

WHEREAS, SAMMY REECE did on the 20 day of SEPTEMBER, 2016, make to the County Treasurer of said County and offer to purchase from the County the tract, lot or parcel of land hereinafter described; and

WHEREAS, the County Treasurer caused notice of said offer to be given by publication once a week for three consecutive weeks preceding the sale in the STILLWATER NEWSPRESS, CUSHING CITIZEN, PERKINS JOURNAL, AND YALE PHOENIX newspapers, published at STILLWATER, CUSHING, PERKINS AND YALE, Oklahoma, which notice embraced a description of the property, the amount bid therefor in addition to all costs, the name of the bidder, a statement that the sale of the property so listed would be made at such price and to such bidder unless higher bids were received on the date specified in said notice, and that the terms of sale were strictly for cash in hand, subject to the approval of the Board of County Commissioners; and

WHEREAS, the County Treasurer, at his office in the Court House in PAYNE County, Oklahoma, on the 22 day of NOVEMBER, 2016, the same being the date stated in the foregoing notice, did announce that the hereinafter described tract, lot or parcel of land was about to be sold and would be sold to the highest competitive bidder, and thereafter, upon due consideration of the original bid offered and advertised and all other bids offered on the day above mentioned, ascertained officially that SAMMY REECE had offered the highest competitive bid, and did declare the sale made; and transmitted to the Board of County Commissioners a transcript of the proceedings relating to said sale.

THEREAFTER, the Board of County Commissioners of the aforesaid County and State, being in legal meeting at the Court House in PAYNE County, Oklahoma, on the 22 day of NOVEMBER, 2016, and having before it the transcript of proceedings of the County Treasurer in the sale of the hereinafter described tract, parcel or lot of land as foresaid, upon due consideration found said proceedings to be according to law, that said SAMMY REECE had in fact made the highest competitive bid therefor and had made full tender in cash in hand for the amount bid and in addition the separate and additional charge accrued by reason of costs of sale, that said sale should be approved; and then did, by order, duly made and entered on its records, approve said sale and directed its chairman to execute a deed for the same to the grantee, herein.

NOW, THEREFORE, this indenture made this 22 day of NOVEMBER, 2016 between PAYNE County, State of Oklahoma, By KENT BRADLEY, the Chairman of the Board of County Commissioners of said County, of the First Part, and the said SAMMY REECE of the Second Part.

WITNESSETH, That the said Party of the First Part for and in consideration of the premises and the sum of NINETY SEVEN DOLLARS AND TEN CENTS, in hand paid, the receipt whereof is hereby acknowledged hath granted, bargained and sold, and by these presents doth grant, bargain, sell and convey to the said Party of the Second Part, his heirs, and assigns forever, the tract, parcel or lot of land mentioned in said notice of sale, and described as follows, to-wit:

NORTH ADD BLK 1 LOTS 16, 17, CUSHING

In the County of Payne, State of Oklahoma

TO HAVE AND TO HOLD said described tract, parcel or lot of land with the appurtenances thereunto belonging, to said Party of the Second Part, his heirs, and assigns forever, in as full and ample manner as the County is empowered by law to sell the same.

IN TESTIMONY WHEREOF, the said, KENT BRADLEY, Chairman of the Board of County Commissioners of said County of PAYNE, has hereunto set his hand on the day and year aforesaid.

Chairman, Board of County Commissioners

Of PAYNE County, State of Oklahoma

(SEAL)

Health Insurance Premium Subsidy Remittance Agreement

This Health Insurance Premium Subsidy Remittance Agreement is entered into and made effective this ____ day of _____, 2016, by and between the Oklahoma Public Employees Retirement System, UnitedHealthcare of Oklahoma, Inc., and Payne County.

WHEREAS, the Oklahoma Public Employees Retirement System ("OPERS") is a statutory entity created at 74 O.S. §§ 901 et seq., to administer and manage certain retirement plans for public employees in the State of Oklahoma, including the Oklahoma Public Employees Retirement System and the Uniform Retirement System for Justices and Judges (the "Plans");

WHEREAS, UnitedHealthcare of Oklahoma, Inc. ("UnitedHealthcare") is an insurance company incorporated in the State of Oklahoma;

WHEREAS, Payne County ("Employer") is a county organized within the State of Oklahoma as a body politic and corporate and is a participating employer in OPERS;

WHEREAS, pursuant to 74 O.S. § 1316.2, a retired employee who is receiving benefits from OPERS and who continues in force health insurance upon retirement shall have One Hundred Five Dollars (\$105.00) or the premium rate of the health insurance benefit plan, whichever is less, paid by OPERS to the insurance carrier of the participating employer; and

WHEREAS, UnitedHealthcare has been selected by an OPERS's participating employer to provide health insurance benefits to the Employer's active, inactive, and retired employees and it is the desire of UnitedHealthcare to be remitted the insurance premium subsidy as provided by Oklahoma law.

NOW THEREFORE, in consideration of the foregoing and of the mutual covenants and agreements hereinafter contained, the parties agree as follows:

SECTION 1. DUTIES AND RESPONSIBILITIES OF UNITEDHEALTHCARE

1. Certification of Coverage. UnitedHealthcare shall provide verification of the health insurance coverage for all eligible OPERS members of Employer in the form and manner as may be required by OPERS. UnitedHealthcare's verification will be based on the eligibility and other information provided by Employer pursuant to Section 2(1). UnitedHealthcare shall monitor the eligibility of such members and will verify coverage for each member on a monthly basis. This verification shall include a claim for payment of the insurance premium subsidy as provided in Section 4 of this Agreement. UnitedHealthcare shall update OPERS within thirty (30) days of any change in health insurance coverage for the eligible OPERS member or the Employer, the termination date if coverage is dropped or terminated by the eligible OPERS member or the Employer, and/or the effective date of any change in the premium amount. Claims for new retirees shall be made in accordance with Paragraph 2 of Section 4 of this Agreement.

2. Return of Payments. UnitedHealthcare shall return, within a reasonable time after notification by OPERS, any and all insurance subsidy payments remitted to it by OPERS for retired members whom OPERS has determined are not eligible for the payment.

3. Eligibility Reports. UnitedHealthcare shall prepare such reports as may be necessary to determine eligibility for the insurance subsidy payment. The reports shall be given in a form and manner as may be reasonably required by OPERS. UnitedHealthcare shall meet with OPERS as reasonably requested to discuss the reports provided pursuant to this Agreement.

4. Access to Records. UnitedHealthcare shall maintain all records pertinent to its performance under this Agreement, including but not limited to, records reflecting the coverage provided and the amounts paid by OPERS to UnitedHealthcare, in accordance with the record retention policy of the State of Oklahoma. UnitedHealthcare shall make available to OPERS, upon reasonable written request and during normal business hours, all records in its custody and control that are pertinent to its performance under this Agreement. Confidential health information or health claim information is specifically excluded from disclosure under this Agreement. In accepting any contract with OPERS or the Plans, UnitedHealthcare agrees any State or Federal agency that is conducting an examination of UnitedHealthcare will have the right to examine and audit its records. UnitedHealthcare is required to retain all records relative to this Agreement for the duration of the Agreement term and for a period of seven (7) years following the end of each annual term of the Agreement. If an audit, litigation, or other action involving such records is started before the end of the seven-year period, the records are required to be maintained for seven (7) years from the date that all issues arising out of the action are resolved or until the end of the seven-year period, whichever is later.

5. Authorized Agents. UnitedHealthcare shall provide notice to OPERS of its agents who are authorized to execute the certifications and reports required pursuant to this Agreement. Such notice shall be in writing and provided pursuant to Paragraph 1 of Section 6 of this Agreement.

6. Acknowledgement of Compliance. By executing this Agreement, UnitedHealthcare acknowledges that it is providing health insurance coverage for Employer and to the best of UnitedHealthcare's knowledge Employer is in compliance with the provisions of 74 O.S. §§ 1315 and 1316.2.

SECTION 2. DUTIES AND RESPONSIBILITIES OF EMPLOYER

1. Certification of Names and Coverage. Employer shall provide the names, health insurance coverage, and other necessary information for all eligible OPERS members to UnitedHealthcare in a form as may be required by OPERS and/or UnitedHealthcare. Employer shall monitor the eligibility of such members and will certify coverage for each member on a monthly basis or as needed by OPERS and/or UnitedHealthcare to comply with this Agreement.

2. Access to Records. Employer shall maintain all records pertinent to its performance under this Agreement, including but not limited to, records reflecting the coverage provided and the amounts paid by OPERS to UnitedHealthcare, in accordance with the record

retention policy of the State of Oklahoma. Employer shall make available to OPERS, upon reasonable written request and during normal business hours, all records in its custody and control that are pertinent to its performance under this Agreement. Confidential health information or health claim information is specifically excluded from disclosure under this Agreement. In accepting any contract with the OPERS or the Plans, Employer agrees any State or Federal agency that is conducting an examination of Employer will have the right to examine and audit its records. Employer is required to retain all records relative to this Agreement for the duration of the Agreement term and for a period of seven (7) years following the end of each annual term of the Agreement. If an audit, litigation, or other action involving such records is started before the end of the seven-year period, the records are required to be maintained for seven (7) years from the date that all issues arising out of the action are resolved or until the end of the seven-year period, whichever is later.

3. Acknowledgment of Compliance. By executing this Agreement, Employer acknowledges it has retained UnitedHealthcare to provide health insurance to its employees and retirees and that Employer is in compliance with the provisions of 74 O.S. §§ 1315 and 1316.2.

SECTION 3. DUTIES AND RESPONSIBILITIES OF OPERS

1. Necessary Information. OPERS agrees to forward or cause to be forwarded all information that may be necessary to perform any of the duties pursuant to the provisions of this Agreement.

2. Insurance Premium Rate. OPERS agrees to pay the health insurance premium subsidy in the amount and pursuant to the terms set forth in 74 O.S. § 1316.2 for each eligible retired OPERS member who continues the insurance coverage. That amount is currently One Hundred Five Dollars (\$105.00), which may change from time to time as prescribed by law, or the premium rate of the health insurance benefit plan, whichever is less.

SECTION 4. HEALTH INSURANCE PREMIUM SUBSIDY

1. Payment of Health Insurance Premium Subsidy. All payments made by OPERS are to subsidize the cost of the retired member's health insurance premium and shall not be used for any other purpose. Amounts for spouse or dependent insurance or for a retired member's other types of insurance benefits are not to be included. Payments shall be made only for months for which the retired member receives a retirement benefit from OPERS. UnitedHealthcare agrees that no amounts remitted by OPERS for the health insurance premium subsidy will be given or paid to the retired member under any circumstances. Amounts not used to pay eligible health insurance premiums shall be returned to OPERS.

2. Claims. UnitedHealthcare shall submit claims for payment of the health insurance premium subsidy using a claim form provided by OPERS. Claims for each month shall be submitted no later than the tenth (10th) day of each month for coverage provided during that month. The claim shall be electronically filed using OPERS's electronic system and shall include the name and social security number of each member covered, the monthly member-only health insurance premium for each member, the amount of insurance premium subsidy to be paid by

OPERS for each member, and a total amount to be remitted by OPERS to UnitedHealthcare for all covered members. A separate claim shall be submitted for any newly retired members of OPERS no later than the tenth (10th) day of the second month of retirement. The new retiree claim shall indicate, in addition to the normal claim information, the Employer from which the member retired, the retirement date, the date that active health coverage ceased, the date that retiree health coverage began, and a certification that coverage has been continuous.

3. Payment of Claims. Payment shall be made by OPERS within thirty (30) days of receiving a correct and accurate claim. Payment for both of the first two months of retirement shall be made by OPERS within thirty (30) days of receiving a correct and accurate claim. All payments are made in arrears and no payments shall be made in advance. In the event of any dispute with regard to a portion of the payment due, the undisputed portion shall be paid as provided herein.

4. Failure to Submit Claims. A failure to submit claims by UnitedHealthcare or the Employer pursuant to the terms of this Agreement will result in nonpayment by OPERS for the month in which the claim was not properly submitted. In the event of nonpayment by OPERS under this provision, the retired employee shall still be entitled to the insurance subsidy of One Hundred Five Dollars (\$105.00) or the insurance premium, whichever is less, for the month or months of nonpayment which shall be paid by UnitedHealthcare.

SECTION 5. TERM AND TERMINATION

1. Term. This Agreement shall be a binding and continuing agreement for so long as OPERS is obligated by state law to pay the insurance premium subsidy on behalf of the Plans to UnitedHealthcare and so long as UnitedHealthcare is providing insurance coverage to members of OPERS.

2. Termination of Agreement. This Agreement may be terminated by either party upon thirty (30) days written notice. In the event of termination, all health insurance premium subsidy payments will cease, except those premiums which are due for insurance coverage provided prior to the date of termination.

3. Access to Records Following Termination. Following termination of this Agreement, OPERS shall continue to have access to UnitedHealthcare's records of services related to this Agreement for the period of time set forth in Paragraph 4 of Section 1 of this Agreement.

SECTION 6. GENERAL PROVISIONS

1. Notices. Any notice required to be given pursuant to this Agreement shall be in writing and sent by First Class Mail, overnight delivery service or courier, or by facsimile or email and confirmed by First Class Mail or overnight delivery service, to the respective party as set forth below. The notice shall be effective on the date indicated on the postmark.

OPERS:

Oklahoma Public Employees Retirement System
Joseph Fox, Executive Director
5801 N. Broadway Ext., Ste. 200
Oklahoma City, Oklahoma 73118
E-mail: jfox@opers.ok.gov
Phone: 405-858-6737
Fax: 405-848-5967

UnitedHealthcare:

UnitedHealthcare of Oklahoma, Inc.
Cody W. Forehand, Key Accounts
7666 E. 61st Street, Suite 500
Tulsa, Oklahoma 74133
E-mail: cody_forehand@uhc.com
Phone: 918-459-1282
Fax: 844-701-3043

Employer: Payne County
Attn: Glenna Craig, County Clerk
315 West 6th Avenue, #202
Stillwater, OK 74074
Email: gcrraig@paynecountyclerk.org
Phone: 405-747-8310
Fax: 405-747-8304

2. Relationship of the Parties. UnitedHealthcare is an independent contractor and is not to be deemed an employee of the Plans, OPERS or Employer. This Agreement is entered into on behalf of the retirees of OPERS who are members covered by the Plan and entitled to the insurance subsidy as provided by law. Nothing in this Agreement is intended to be construed to create any rights or remedies in any third party.

3. Indemnification. UnitedHealthcare shall indemnify and hold harmless OPERS, its Board of Trustees, employees and agents, from and against any and all claims, damages, losses, liabilities, suits, costs, charges, expenses (including but not limited to reasonable attorney fees and court costs), judgments, fines and penalties, of any nature whatsoever, to the extent attributable to any bad faith, negligence, willful misconduct, improper or unethical practice, infringement of intellectual property rights, breach of trust, breach of confidentiality, breach of contract or violation of any material legal duty or requirement by UnitedHealthcare acting in connection with this Agreement. This indemnification shall survive any termination of this Agreement. Nothing herein shall be construed to limit or waive any of UnitedHealthcare's rights, defenses, claims to contribution, and other remedies which it may be entitled to assert in any action involving a claim that may be subject to indemnification under this paragraph.

4. Force Majeure. Notwithstanding any other provision of this Agreement, neither OPERS nor UnitedHealthcare shall be held liable for any losses to the Plans or the other party, or any inability to perform its obligations or duties hereunder, arising from causes beyond the control and without the fault of such party. Such causes may include, but are not restricted to, acts of God, acts of war, acts of any foreign, international, federal or state government in such governments sovereign capacity, fires, exchange or market rulings, suspension of trading, strikes, or mechanical breakdown or failure; provided, that in every case, the failure to perform must be beyond the control and without the fault or negligence of such party.

5. Material Breach. Nothing in this Agreement shall be construed to limit either party's remedies at law or in equity in the event of a material breach of this Agreement.

6. Dispute Resolution. OPERS, UnitedHealthcare and Employer agree that their authorized representatives will timely meet and negotiate in good faith to resolve any problems or disputes that may arise in the performance of the terms and provisions of this Agreement.

7. Non-Collusion. UnitedHealthcare acknowledges that neither it or anyone subject to its direction or control has paid, given or donated or agreed to pay, give or donate to any officer or employee of the State of Oklahoma any money or other thing of value, either directly or indirectly, in the awarding of this Agreement. UnitedHealthcare also acknowledges that no person who has been involved in any manner in the development of this contract while employed by the State of Oklahoma shall be employed by UnitedHealthcare to fulfill any of the services provided for under this Agreement.

8. Confidentiality. All information furnished to UnitedHealthcare by OPERS and Employer pursuant to this Agreement shall be treated as confidential and shall not be disclosed to any third party without prior written approval of OPERS or Employer, except as required by law, legal proceeding or by any regulatory authority. Any confidential information of OPERS or Employer may be used by UnitedHealthcare only in connection with the coverage provided pursuant to this Agreement. UnitedHealthcare agrees to protect the confidentiality of any information of OPERS and Employer in the same manner that it protects the confidentiality of its own proprietary and confidential information.

9. Binding Effect; Assignment. This Agreement shall be binding upon and inure to the benefit of the parties hereto and their respective successors. The rights and obligations hereunder shall not be assignable, transferable or delegable without the written consent of the other party to this Agreement. Any attempted assignment, transfer or delegation thereof without such consent shall be void.

10. Entire Agreement. This Agreement, including all exhibits and certifications, constitutes the entire agreement between the parties hereto pertaining to the subject matter hereof, and any and all other written or oral agreements existing between the parties hereto are expressly merged herein.

11. Amendment. This Agreement may be amended only by a written instrument signed by all parties.

12. Governing Law and Venue. This Agreement shall be construed in accordance with the laws of the State of Oklahoma (without regard to the legislative or judicial conflict of laws rules of any state), except to the extent superseded by Federal law. Should either party initiate a lawsuit or other dispute resolution proceeding over any matter relating to or arising out of this Agreement, such lawsuit or other proceeding shall be filed and conducted in the District Court of Oklahoma County, State of Oklahoma.

13. Severability Clause. If any provision of this Agreement or any portion thereof, or the application of any such provision or portion thereof, shall be held invalid, illegal, void or unenforceable in any respect by a court of competent jurisdiction or an administrative authority, such invalidity, illegality or unenforceability shall not affect any other provision hereof or the remaining portion thereof, and the validity of the entire Agreement as a whole shall not be affected thereby.

14. Authorized Signatures. Each of the undersigned represent that they are authorized to sign this Agreement on behalf of the parties hereto. The parties each represent that no provision of this Agreement will violate any other agreement that a party may have with any other person or company. OPERS is duly formed and a validly existing body corporate and instrumentality of the State of Oklahoma. UnitedHealthcare is a duly formed and validly existing company incorporated and located in the State of Oklahoma. Employer is a duly formed and a validly existing body corporate and instrumentality of the State of Oklahoma. Each party has relied upon these representations in entering into this Agreement.

15. Headings. The headings contained in this Agreement are for reference purposes only and shall not affect the meaning or interpretation of this Agreement.

IN WITNESS WHEREOF, OPERS, UnitedHealthcare and Employer have read and understand the foregoing terms of this Agreement and do by their respective signatures dated below agree to the terms thereof.

THE OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM

By: _____
Name: Joseph Fox
Title: Executive Director

Date: _____

UNITEDHEALTHCARE OF OKLAHOMA, INC.

By: _____
Name:
Title:

Date: _____

**PAYNE COUNTY
BOARD OF COUNTY COMMISSIONERS**

Approved by the Board of County Commissioners on this _____ day of _____, 2016.

By: _____
Name: Kent Bradley
Title: Commissioner, Chairman

By: _____
Name: Zach Cavett
Title: Commissioner

By: _____
Name: Chris Reding
Title: Commissioner

Attest:

Glenna Craig, Payne County Clerk

Approved: _____
Payne County District Attorney

VII.D.

SHELL TRADING (US) COMPANY.
CUSTOMER SERVICE
Office Hours 7:30 A.M. - 4:30 P.M. (CST)
Telephone: 1-800-992-8470 FAX: (713)230-3909
Visit our website at: www.shell.com/us/leaseadmin

COUNTY OF PAYNE STATE OF OK
315 W 6TH SUITE #203
STILLWATER OK 74074
UNITED STATES OF AMERICA

OCTOBER 31, 2016

Dear Interest Owner,

The enclosed Authorization Document has been prepared on the basis of documentation provided.

Please examine the Authorization Document for accuracy. If you agree with the interest set forth, execute the original, retaining the copy provided for file and future reference. A correct mailing address and Social Security or Tax Identification number are required and should be included in the spaces provided. The executed original should then be returned to our office.

If the fully executed Authorization is received in our office on or before the end of the month, we will release payment for prior purchases on the 20th day of the following month, via payment methods of ACH or Wire payment only, providing that the accruals to the interest amount to at least \$100.00.

Please refer to our lease number and your owner number in any communications with our company so that we can respond promptly.

FOR YOUR INFORMATION

Payments will be made monthly for oil received during the previous month unless the amount due is less than \$100.00. Amounts of less than \$100.00 will be accumulated and paid when the total either equals or exceeds \$100.00 or at such time during each fiscal year when all amounts due of \$5.00 or more are released to owners whose accounts are in pay status. Amounts due of less than \$5.00, will be released when requested by owner.

Please send written notice of any name or address change to:
Division Order Department, P.O. Box 4604, Houston, TX 77210-4604
Be sure to indicate your owner and tax identification numbers

AUTHORIZATION TO RECEIVE OIL AND DIRECTION FOR PAYMENT

TO: **SHELL TRADING (US) COMPANY (STUSCO)**
 Division Order Department
 Post Office Box 4604
 Houston, Texas 77210-4604
 Toll Free 1-800-992-8470

Lease No. **132314**

Date: **OCTOBER 31, 2016**

Effective at 7:00 A.M. **SEPTEMBER 1, 2016** and until the first day of the month following thirty (30) days advance written notice of change of ownership or termination, you are authorized to receive the production of the undersigned from the following described lease in accordance with your agreement with the lease operator:

TAG PETROLEUM INC -- **NASH # 13-1** **LEASE**

located in **PAYNE** County, State of **OKLAHOMA**

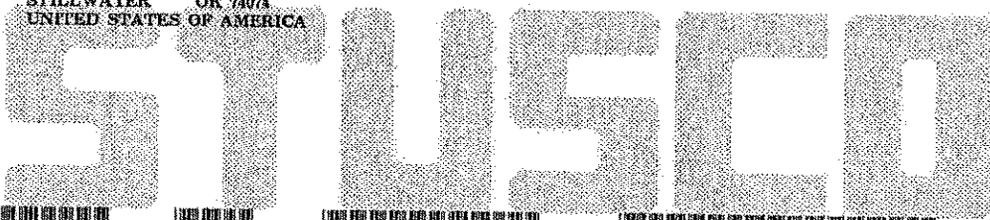
described as:
SEC 13-T46S-R2E PAYNE COUNTY, OK

The undersigned warrants to STUSCO ownership of the interest indicated below next to their name in the oil produced and saved from the above lease and directs STUSCO to distribute payment for such oil as provided below.

CREDIT TO OWNER NUMBER: 000447637 **TYPE: ROYALTY** **INTEREST: 0.0002841**
TRANSFERRED FROM: 0003113847 999999999

CURRENT INTEREST(S) IN PAY STATUS FOR THIS LEASE:

COUNTY OF PAYNE STATE OF OK
315 W 8TH SUITE #203
SHILLWATER OK 74074
UNITED STATES OF AMERICA



In the event of a dispute concerning title to any portion of the proceeds of this interest, STUSCO may hold the proceeds until it receives evidence of title satisfactory to STUSCO. The undersigned agrees to notify STUSCO in writing of any change in the decimal interest and all changes shall be effective the first day of the month following STUSCO's receipt of such notice. For any claims arising from the undersigned's failure to provide written notice, the undersigned will fully indemnify and hold STUSCO harmless. If action or inaction by the undersigned causes STUSCO to over-pay this interest, then STUSCO may recoup the overpaid amount from the undersigned's interests in other leases. Finally, all payments shall be subject to all present and future laws, regulations and orders.

SIGNATURE OF OWNER(S)
 X _____
 X _____

PAYMENT FOR THIS INTEREST SHOULD BE SENT TO:

SOCIAL SECURITY OR TAX ID NUMBER

CORRESPONDENCE AND IRS FORM 1099 SHOULD BE SENT TO:

DAYTIME TELEPHONE NUMBER () _____

Please check if these are **NEW ADDRESSES** and apply to all leases with this owner number.

REC'D	
N/A	
SUSPENSE	
D of I	
ANALYST	

ZIP + 4 CODE IS REQUESTED

STUSCO ROUTING

Date: 12/1/2016
Time: 2:57:45PM

Expense Verification Report

Batch Number: 049 **VIII.A.**

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
	003041	001790	01081310		REDING CHRIS	69.12	69.12	0.00	***DO NOT MAIL***		TRAVEL
	003040	001791	01042005		PROFESSIONAL VALUE INTERNET	239.85	239.85	0.00	INVOICE NO. 242828 ACCOUNT NO. 6259 PAYNE COUNTY SHERIFF		ANTENNA
	002423	001792	01202580		STILLWATER NEWSPRESS	700.00	426.70	-273.30	INVOICE NO. 490592; 490596; 490595; 490594; 490593 CUSTOMER NO. 00011879 PAYNE COUNTY		NOVEMBER BLANKET
	002424	001793	01202580		DELPHIA PUBLISHING,LLC	750.00	383.00	-367.00	INVOICE NO. 953 PAYNE COUNTY		NOVEMBER BLANKET
	002522	001794	01202580		THYSSENKRUPP ELEVATOR	200.00	200.00	0.00	INVOICE NO. 3002863596 CUSTOMER NO. 48933 PAYNE COUNTY ADMIN BUILDING		ELEVATOR INSPECTION
	002524	001795	01202005		THYSSENKRUPP ELEVATOR	200.00	200.00	0.00	INVOICE NO. 3002863596 CUSTOMER NO. 48933 PAYNE COUNTY COURTHOUSE		ELEVATOR INSPECTION
	002523	001796	01202005		THYSSENKRUPP ELEVATOR	200.00	200.00	0.00	INVOICE NO. 3002863596 CUSTOMER NO. 48933 PAYNE COUNTY COURTHOUSE		ELEVATOR INSPECTION
	002422	001797	01202580		HUNSUCKER BROTHERS, INC	150.00	53.00	-97.00	INVOICE NO. S1790264.001 CUSTOMER NO. 1257 PAYNE COUNTY		NOVEMBER BLANKET

PRELIMINARY Batch Pay
December 5, 2016
FY 2016-2017
\$95,253.46

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
	002407	001798	01422005		GRIMSLEYS, INC.	750.00	129.87	-620.13	INVOICE NO. 262065 PAYNE COUNTY COMMISSIONER.		NOVEMBER BLANKET
	002410	001799	01202580		BUNNEY ELECTRIC CO., INC.	500.00	174.00	-326.00	INVOICE NO. 3308 PAYNE COUNTY COMMISSION		NOVEMBER BLANKET
	002583	001800	01042005		ID SPECIALISTS INC	114.00	123.22	9.22	INVOICE NO. 41357 ACCOUNT NO. PA0606 PAYNE COUNTY SHERIFF		CLEANING KIT
	002344	001801	01022005		QUALITY WATER SERVICES	200.00	114.75	-85.25	INVOICE NO. 1346645; 1346646; 1348956; 1348957; 1350531; 1350534 ACCOUNT NO. 300021 PAYNE COUNTY DISTRICT ATTORNEY		NOVEMBER BLANKET
	002719	001802	01162005		ENVIROMENTAL SYSTEMS RESEARCH INSTITUTE INC	9,500.00	9,500.00	0.00	INVOICE NO. 93211860 PAYER NO. 267152 PAYNE COUNTY ASSESSOR		SERVER SET UP
	002411	001803	01202580		LOWE S COMPANIES, INC.	200.00	34.14	-165.86	INVOICE NO. 945986 ACCOUNT NO. 9900 0521197 PAYNE COUNTY		NOVEMBER BLANKET
	002426	001804	01202580		PERKINS JOURNAL	750.00	75.00	-675.00	INVOICE NO. 13756 PAYNE COUNTY COMMISSION		NOVEMBER BLANKET
	002425	001805	01202580		CUSHING CITIZEN	750.00	140.13	-609.87	INVOICE NO. 25813; 25857 PAYNE COUNTY		NOVEMBER BLANKET

Expense Verification Report

Batch Number: 049

PP	PO #	War #	Account	Dist	Vendor	Encumbered	Pay Amount	Adjustment	Comments	Invoices	Purpose
	002838	001806	01202005		SUNSET MEMORIAL GARDENS	800.00	800.00	0.00	INVOICE: THOMAS JONES DOB: 11/27/1948 PAYNE COUNTY		INDIGENT BURIAL
	003030	001807	01042005		A T & T	218.91	218.91	0.00	ACCOUNT NO. 405 372-1440 584 0		UTILITY BILL
	002652	001808	01042005		DEARINGER PRINTING & TROPHY	165.00	165.00	0.00	INVOICE NO. T46760 CUSTOMER NO. 1117 PAYNE COUNTY SHERIFF		NAME TAGS
	000994	001809	01042005		J & I HITCH COMPANY	500.00	500.00	0.00	INVOICE NO. 072120 PAYNE COUNTY SHERIFF		SPOTLIGHT
	002822	001810	01042005		FEDEX KINKOS	200.00	159.96	-40.04	INVOICE NO. 012400006228 ACCOUNT: PAYNE COUNTY DISTRICT ATTORNEY PAYNE COUNTY SHERIFF		BUSINESS CARDS
	002343	001811	01022005		THE MEADOWS	150.00	45.00	-105.00	INVOICE NO. 1001241 PAYNE COUNTY DISTRICT ATTORNEY		NOVEMBER BLANKET
	002240	001812	01022005		OKLA. BAR ASSOCIATION	191.25	191.25	0.00	INVOICE NO. 13004 ACCOUNT NO; PAYNEDA01 PAYNE COUNTY DISTRICT ATTORNEY		ADVERTISING FOR EMPLOYMENT
	001608	001813	01162005		EDA	176.13	176.13	0.00	INVOICE NO. EOW0064032 PAYNE COUNTY ASSESSOR		SUBSCRIPTION

Date: 12/1/2016
 Time: 2:57:46PM

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
	002839	001814	01202005		CUNDIFF CPA., STEVEN F.	9,000.00	9,000.00	0.00	ACCOUNT NO. 4790 PREP OF FINAL AMENDED BUDGET & SALES TAX PAYNE COUNTY		AUDITING SERVICES
	002853	001815	01042005		COWBOY TOWING	137.76	137.76	0.00	INVOICE NO. 36274 PAYNE COUNTY SHERIFF		TOW
	002858	001816	01202580		U.S. CELLULAR	358.12	358.12	0.00	INVOICE NO. 0165405017 ACCOUNT NO. 851940733 PAYNE COUNTY		TELEPHONE
	002467	001817	01042005		A & B ECO-SAFE	50.00	50.00	0.00	INVOICE NO. 57849 NOVEMBER 2016 PAYNE COUNTY SHERIFF		NOVEMBER BLANKET
	002802	001818	01162005		MERRIFIELD OFFICE SUPPLY	451.71	451.71	0.00	INVOICE NO. 0108378-001 ACCOUNT NO. 401987-01 PAYNE COUNTY ASSESSOR		SUPPLIES
Totals for COUNTY GENERAL						<u>\$27,671.85</u>	<u>\$24,316.62</u>	<u>-3,355.23</u>			
	002238	000653	02802103		QUAPAW CO., INC.	14,000.00	24,923.41	10,923.41	INVOICE NO. 654965; 655021; 655076; 655135 ACCOUNT NO. 63350 PAYNE COUNTY DISTRICT 3		HAULING SABM
	002554	000654	02802001		RETAIL FINANCE CREDIT SERVICES, ATTN: DONNA PRING	50.00	44.88	-5.12	INVOICE NO. 09140 ACCOUNT NO. 6032 2020 0002 9950 PAYNE COUNTY DISTRICT 1		OFFICE/CLEAN ING

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
002693	000655	02802001			KINNUNEN SALES & RENTALS,	179.76	179.76	0.00	INVOICE NO. 1304194 PAYNE COUNTY DISTRICT 1		GLOVES
002752	000656	02802001			CUSHING LUMBER COMPANY	34.75	35.54	0.79	INVOICE NO. 148569 PAYNE COUNTY DISTRICT 1		CONCRETE
002751	000657	02802001			KINNUNEN SALES & RENTALS,	377.16	377.16	0.00	INVOICE NO. 1304996 PAYNE COUNTY DISTRICT 1		PIPE
002508	000658	02802001			PIPELINE CROSSROADS CLINIC	1,370.00	1,370.00	0.00	INVOICE NO. 001013 M PETERSON; M DAVIS; J JONES; M ROBINSON; J TAYLOR; J BROCKEMP; J BURTON; D SHREEVES; B FOWLER; D DALTON; C SHREEVES; S BALES; J MILLER; R EVELSIZER; B GIPSON; R CARPENTER; J ROBERTS PAYNE COUNTY DISTRICT 1		DRUG & ALCOHOL TESTING
002608	000659	02802001			LOT MAINTENANCE OF OKLAHOMA, INC	860.52	860.52	0.00	INVOICE NO. 034683 CUSTOMER ID: PAYNE COUNTY PAYNE COUNTY DISTRICT 1		FOAM FILL TIRE

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
002085	000660	02802001			OKLA. CORRECTIONAL IND.	127.60	127.60	0.00	INVOICE NO. 75274 CUSTOMER NO. 610057 PAYNE COUNTY DISTRICT 1		DECALS
002610	000661	02804001			CATERPILLAR FINANCIAL	4,765.85	4,765.85	0.00	INVOICE NO. 17492296 CUSTOMER NO. 167495 PAYNE COUNTY DISTRICT 1		PAYMENT
001804	000662	02802001			UNIFIRST	1,000.00	540.68	-459.32	INVOICE NO. 843 1545413; 843 1546140; 843 1546856; 843 1547594 ACCOUNT NO. 565132 PAYNE COUNTY DISTRICT 1		OCTOBER BLANKET
002601	000663	02802001			LIONEL HARRIS OIL CO., INC.	11,130.00	10,606.15	-523.85	INVOICE NO. 388455 PAYNE COUNTY DISTRICT 1		DYED DIESEL
002178	000664	02802001			KERNS READY MIXED	475.00	475.00	0.00	INVOICE NO. 55887 CUSTOMER ID. 5761 PAYNE COUNTY DISTRICT 1		FLOWABLE FILL
001564	000665	02802103			EARL LE DOZER	6,950.00	6,889.91	-60.09	INVOICE NO. 16-116229 CUSTOMER ID: PAYNE COUNTY #3		HAULING
002376	000666	02802003			FRONTIER FIRE PROTECTION	200.00	186.45	-13.55	INVOICE NO. 47761 PAYNE OCUNTY DISTRICT 3		NOVEMBER BLANKET

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
	002713	000667	02802003		STILLWATER NEWSPRESS	65.05	65.05	0.00	INVOICE NO. 491069 CUSTOMER NO. 00011879 6 MONTH BIDS PAYNE COUNTY		SIX MONTH BIDS
	002842	000668	02802001		CENTRAL RURAL	318.89	318.89	0.00	ACCOUNT NO. 765303 PAYNE COUNTY		SERVICES
	002843	000669	02802001		CENTERPOINT ENERGY	38.61	38.61	0.00	ACCOUNT NO. 552454-1 PAYNE COUNTY		SERVICE FEE
	002845	000670	02802001		A T & T	254.21	254.21	0.00	ACCOUNT NO. 918 225-1330 753 5 PAYNE COUNTY DISTRICT 1		UTILITY BILL
Totals for HIGHWAY CASH						<u>\$42,197.40</u>	<u>\$52,059.67</u>	<u>9,862.27</u>			
	002846	000180	08882005		A T & T	1,217.51	1,217.51	0.00	ACCOUNT NO. 918 225-3377 815 2 PAYNE COUNTY HEALTH DEPT		UTILITY BILL
	002847	000181	08882005		CENTERPOINT ENERGY	23.78	23.78	0.00	ACCOUNT NO. 8160721-0 PAYNE COUNTY HEALTH DEPT		UTILITIES
	002848	000182	08882005		CITY OF STILLWATER	2,227.19	2,227.19	0.00	ACCOUNT NO. 37233-48325 PAYNE COUNTY HEALTH DEPT		UTILITIES
Totals for HEALTH DEPARTMENT						<u>\$3,468.48</u>	<u>\$3,468.48</u>	<u>0.00</u>			
	002740	000123	09043910		DEPT. OF ENVIRONMENTAL QUALITY	263.22	263.22	0.00	INVOICE NO. 30143692 PAYNE COUNTY SHERIFF		SOIL TESTING

Date: 12/1/2016
 Time: 2:57:46PM

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
002489	000124	09043910			STILLWATER ARMORY LLC	400.00	387.80	-12.20	INVOICE NO. 15980; 15999 ACCOUNT NO. PCSO PAYNE COUNTY SHERIFF OFFICE		NOVEMBER BLANKET
Totals for SHERIFF SERVICE FEE						<u>\$663.22</u>	<u>\$651.02</u>	<u>-12.20</u>			
002916	000033	13103910			QUALITY WATER SERVICES	35.00	35.00	0.00	INVOICE NO. 1350752 ACCOUNT NO. 310570 PAYNE COUNTY CLERK		DECEMBER BLANKET
002737	000034	13103910			MIDWEST PRINTERS	356.00	350.58	-5.42	INVOICE NO. 50694 CUSTOMER ID: PAYNE COUNTY PAYNE COUNTY CLERK		W-2 & 1099
002700	000035	13103910			MIDWEST PRINTERS	177.00	171.37	-5.63	INVOICE NO. 50684 CUSTOMER ID. PAYNE COUNTY PAYNE COUNTY CLERK		RESOLUTION PAPER
Totals for MECHANIC LIEN FEE						<u>\$568.00</u>	<u>\$556.95</u>	<u>-11.05</u>			
002830	000138	22842005			QUEST TECHNICAL SERVICE	1,375.00	1,375.00	0.00	INVOICE NO. 1464 PAYNE COUNTY EXPO CENTER		SOUND SYSTEM
Totals for FAIRBOARD CASH						<u>\$1,375.00</u>	<u>\$1,375.00</u>	<u>0.00</u>			
002635	000172	30042005			GRIMSLEYS, INC.	323.46	163.88	-159.58	INVOICE NO. 262731; 262731-1; CREDIT INVOICE NO. 242339; OP739; 263701 PAYNE COUNTY SHERIFF		SUPPLIES

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist.</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
	002826	000173	30042005		GRIMSLEYS, INC.	1,264.27	1,267.82	3.55	INVOICE NO. 263831 PAYNE COUNTY SHERIFF		JANITORIAL SUPPLIES
	002825	000174	30042005		GRIMSLEYS, INC.	405.35	407.70	2.35	INVOICE NO. 263826 PAYNE COUNTY SHERIFF		CLEANING SUPPLIES
	002505	000175	30042005		CDW GOVERNMENT, INC.	6,865.49	6,865.49	0.00	INVOICE NO. FVP4771; FVW1803; FWD8339; FWL5450; FXP7012; GBP5882 CUSTOMER NO. 10642559 PAYNE COUNTY SHERIFF		SUPPLIES
	002685	000176	30042005		QUALITY WATER SERVICES	321.50	321.50	0.00	INVOICE NO. 1349928 ACCOUNT ID. 302164 PAYNE COUNTY SHERIFF		SALT BAGS
	002653	000177	30042005		EWING ELECTRIC COMPANY LLC	500.00	233.80	-266.20	INVOICE NO. 0072416; 0072380 PAYNE COUNTY SHERIFF		FLOOR BURNISHER
	002626	000178	30042005		B & L HEATING & AIR	350.00	1,142.68	792.68	INVOICE NO. 97124 PAYNE COUNTY SHERIFF		REPAIRS
	002468	000179	30042005		A & B ECO-SAFE	200.00	200.00	0.00	INVOICE NO. 57851 NOVEMBER 2016 PAYNE COUNTY SHERIFF		NOVEMBER BLANKET
Totals for JAIL OPERATION & MAINTENANCE						<u>\$10,230.07</u>	<u>\$10,602.87</u>	<u>372.80</u>			

Expense Verification Report

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
002431	000041	36042005			STAPLES	300.00	257.26	-42.74	INVOICE NO. 62906 ACCOUNT NO. 6035 5178 2010 4049 PAYNE COUNTY		NOVEMBER BLANKET
002430	000042	36042005			OAKES SERVICE CENTER	800.00	381.30	-418.70	INVOICE NO. 34835; 34844; 41772; 40708; 41027; 41028; 40808; 41048; 40826 PAYNE COUNTY SOLID WASTE		NOVEMBER BLANKET
002428	000043	36042005			LOWE S COMPANIES, INC.	300.00	28.57	-271.43	INVOICE NO. 936678 ACCOUNT NO. 9900 0521197 PAYNE COUNTY		NOVEMBER BLANKET
002429	000044	36042005			NAPA AUTO PARTS	300.00	56.39	-243.61	INVOICE NO. 115818; 117076 PAYNE COUNTY SOLID WASTE		NOVEMBER BLANKET
002859	000045	36042005			U.S. CELLULAR	457.22	457.22	0.00	INVOICE NO. 0165405017 ACCOUNT NO. 851940733 PAYNE COUNTY		TELEPHONE
Totals for SOLID WASTE						<u>\$2,157.22</u>	<u>\$1,180.74</u>	<u>-976.48</u>			
001224	000049	67914005ST-1/			ROSS SERVICE STATION	1,000.00	94.15	-905.85	INVOICE NO. 12328; 13146 SEPTEMBER 2016 GLENCOE FIRE DEPT		SEPTEMBER BLANKET
001789	000050	67914005ST-1/			ROSS SERVICE STATION	1,000.00	118.80	-881.20	INVOICE NO. 14958; 16033; 16597; 16631 OCTOBER 2016 GLENCOE FIRE DEPT		OCTOBER BLANKET
Totals for 67-1/6TH FIRE DEPARTMENTS						<u>\$2,000.00</u>	<u>\$212.95</u>	<u>-1,787.05</u>			

Date: 12/1/2016
 Time: 2:57:45PM

Expense Verification Report

Batch Number: 049

<u>PP</u>	<u>PO #</u>	<u>War #</u>	<u>Account</u>	<u>Dist</u>	<u>Vendor</u>	<u>Encumbered</u>	<u>Pay Amount</u>	<u>Adjustment</u>	<u>Comments</u>	<u>Invoices</u>	<u>Purpose</u>
003036	000846	78091310	ST-3/		BARTA, SUZETTE D.	37.37	37.37	0.00	***DO NOT MAIL***		TRAVEL
003031	000847	78092005	ST-3/		PITNEY BOWES, INC	254.12	254.12	0.00	INVOICE NO. 1002494971 ACCOUNT NO. 0015547462		POSTAGE SUPPLIES
002850	000848	78092005	ST-3/		STANDLEY SYSTEMS INC.	7.50	7.50	0.00	INVOICE NO. INV665943 ACCOUNT NO. PC01 PAYNE COUNTY EXTENSION OFFICE		SHIPPING
002851	000849	78091310	ST-3/		LEISTER SUMMER	384.44	384.44	0.00	***DO NOT MAIL***		TRAVEL
002852	000850	78092005	ST-3/		A T & T MOBILITY	145.73	145.73	0.00	ACCOUNT NO. 287230331168 PAYNE COUNTY EXTENSION OFFICE		UTILITIES
Totals for 78-3/8TH SALES TAX						<u>\$829.16</u>	<u>\$829.16</u>	<u>0.00</u>			
Grand Totals:						<u>\$91,160.40</u>	<u>\$95,253.46</u>	<u>4,093.06</u>			