Purchase (	Order#
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## STILLWATER PUBLIC SCHOOLS

ATTN: FINANCE
314 SOUTH LEWIS STREET
PO BOX 08
STILLWATER, OK 74076-0879
Phone (405) 533-6300
Fax (405) 533-6311

## **NON-KICK BACK AFFIDAVIT**

Vendor:	
Address:	
City, State, & Zip:	
STATE OF	
COUNTY OF)	
sworn, on oath says that this invoice or claim that the (work, services or materials) as show (completed or supplied) in accordance with t furnished by affiant. Affiant further states t	the plans, specifications, orders or requests hat (s) he has made no payment directly or inployee of the Stillwater School District I-16, in payment of the invoice or procure the
	(Architect, contractor, supplier, or engineer)
Subscribed and sworn to before me this	day of, 20
	Notary Public (or Clerk or Judge)
My commission expires:	