Please print in ink or type

JAN 12 2016

BEFORE THE STATE CLAIMS COMMISSION

Of the State of Arkansas

RECEIVED

□ Mr. □ Mrs,		Do	Not Write in These Spaces
□ Ms. □ Miss Schlumberger Technology	Com	Claim No. 1	6-0492-CC
S MASS SOMEWHOOGY	Claima Claima	Date Filed_	January 12, 2016
vs.	Ciama	Amount of Cle	January 12, 2016 (Month) (Day) (Year) \$426,851.00
State of Arkansas, Respondent		Fund	and 2
			DFA/RD
AR Dept. of Finance & Adminis Schlumberger Technology Corp	COMPLA	1	nce of Warrant (Check) [310333360
			. & No.) (City)
(State) (Zip Code) (Daytime Phone No.)	241-245-4345	represented by (Legal	Counsel, if any, for Claim)
(Street and No.)			, cary, to openin
,	(City) (State) (Zip	Code) (Phone No.) (Fax No.)
State agency involved: Month, day, year and place of incident or service:		Amount sought:	
This claim is being filed payable to Schlumberge: AR Dept. of Finance &	for the reissuance of warranter Technology Corp in the a Administration. This warrantering the legal redemption	amount of \$426,851	AA povoble from
Warrant or nacessay non	C		
made a part of this compl	ers for reissuing lost warrar aint.	t(s)/check(s) is/are	attached to and
Completed paperwork for	reissuance of this warrant	was received in this	office on
September 30, 2015.			
s parts of this complaint, the claimant makes the statements,	and answers the following questions, as inc	licated: (1) Has claim been pres	ented to any state department or officer thereof
(Yes or No) (Month) (Day)	(Year) ; to whom? HR TE	PT OF PINAL	CE + ADMINISTRATIO
COMMISSION AS MENTIP	the following action was taken thereon:	WETENIZEV TO	CLAHMS
The state of the s	2) Has any third person or corporation an i	interest in this claim?	; if so, state name and address
(Name)	(Street or R.F.D. & No.)		itate) (Zip Code)
Ithat the nature thereof is as follows:	; and was acquired on		, (
			in the following manner:
THE UNDERSIGNED states on outh that he or s t they are true. MICHEUE F SWITH	A . T	gs set forth in the above cor _ SwiM	nplaint, and that he or she verily believes
(Print Claimant/Representative Name)		(Signature of Clai	mant/Representative)
	TO and subscribed before me at	Sugar La	nd Texas
DAGAN ELIZABETH MANAHL	11.14	January	(State)
Ny Commission Expires on the March 24, 2019	is 11 th day of Date	Elizabeth	Mandle (Year)
11- R7/99 My C	Commission Expires:	esch 24	otary Public
		(Month)	(Day) (Year)

ARKANSAS STATE CLAIMS COMMISSION Phone # 682-1619 Fax # 682-2823 NOTICE OF LOST/ OUTDATED WARRANT(S)

PART I				
The records of the Department of Finance and Administration of Arkansas, Phone # 682-4775				
Agency				
Agency Address1816 W 7 th Street_Room 2250, Little Rock, AR 72203				
reflect that Schlumberger Technology Corp				
Pavee/Pavees				
205 Industrial Blvd, Room 105 , Sugar land ,				
Payee's Address City				
TX , was/were issued				
State Zip Code				
State Warrant number: 1310333360, dated 12/10/2012				
in the amount of \$, the same being in payment				
of Voucher No. 8025012694, Agency No. 0630				
Appropriation No. 237 , Character Code 14 ,				
Fund Code TGC , Social Security No, or				
if corporation-Federal Tax ID No.				
Business Area <u>0630</u> Fund Code <u>TGC0000</u> Cost Center Group <u>397618</u> Fund Center <u>237</u>				
Scott D Fryer, Assistant Administrator				
Agency Disbursing Officer's Full Name (Please Print)				
Teath I me				
Agency Disbursing Officer's Signature ************************************				
STATEMENT OF FORGERY (FORGED WARRANTS ONLY)				
PART II				
I/We,, state that:				
Name(s)				
1. I/We received and lost.				
2. I/We did not receive, endorse nor cash.				
3. I/We have not authorized another person to				
sign my/our name(s) to the warrant.				
4. I/We have no knowledge of the whereabouts of the warrant or				
of any other person having received, cashed or endorsed the warrant.				
5. When this warrant was presented for payment, the endorsement was a forgery.				

STATE CLAIMS COMMISSION LUCKET OPINION

Amount of Claim \$ 426.851.00	Claim No	16-0483-C
	Attorneys	
Schlumberger Technology Corp	Pro se	Claimant
VS.		Claimant
DF & A/ Revenue Division	Scott Fryer, Disbursing Officer	
State of Arkansas Respondent		Respondent
Date Filed January 12, 2016	Type of Claim Reissuance of warrant	
FINDING (OF FACTS	
This claim was filed requesting reissuance Warrant is still outstanding and no duplic. The Claims Commission hereby unanim of \$426,851.00 and will include the claim Arkansas State Legislature 2016, for su	ate has been issued. ously allows this claim in the amount m in a claims bill to the 91st General A	
IT IS SO ORDERED.		
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(See Back of Or	pinion Form)	
Upon consideration of all the facts, as state unanimously allowed this claim in the an in a claims bill to be submitted to the 91 st 2016 for subsequent approval and payment.	d above, the Claims Commission hereb nount of 426,851.00 and will include the General Assembly, Arkansas State Lo	e claim
Date of HearingFebruary 11, 2016	000	
	(20Xs)	
	HULLIAN	
Date of Disposition — February 11, 2016	Mus Hoffins	Chairman
	Com	missioner
	Bell Laures	
	Com	missioner