NOTICE
GLENPOOL AREA EMERGENCY MEDICAL SERVICE DISTRICT
REGULAR MEETING

A Regular Session of the Glenpool Area Emergency Medical Service District will be held at 6:00 p.m. March 3, 2025, immediately following the Glenpool Industrial Authority meeting, at Glenpool City Hall, City Council Chambers, 12205 S. Yukon Ave., 3rd Floor, Glenpool, Oklahoma.

NOTE: The Glenpool Area Emergency Medical Service District will be assembled for the meeting at the City Council Chambers, 12205 S. Yukon Ave, Glenpool, Oklahoma. Members of the public are invited to attend the in-person meeting, or join a live broadcast at this link:
Join Zoom Meeting
https://us02web.zoom.us/j/89753555435?pwd=QzdFVjA1b0lKa1lSUFlKbUNrUUxtdz09
Meeting ID: 897 5355 5435
Passcode: 974088
One tap mobile
+13462487799, US (Houston)
+14086380968, US (San Jose)
Dial by your location
+1 253 215 8782 US (Tacoma)
+1 346 248 7799 US (Houston)
Meeting ID: 897 5355 5435
Passcode: 974088
Find your local number: https://us02web.zoom.us/u/kdrY6w7ABX

The GEMS Board welcomes comments from citizens of Glenpool who wish to address any item on the agenda.

- Speakers attending in **PERSON** are required to complete the Request to Speak form located on the agenda table and return to the City Clerk **PRIOR TO THE CALL TO ORDER.**
- Speakers attending via **ZOOM** are required to complete the Request to Speak form located on our website: https://glenpoolonline.civicweb.net/document/19057/Request%20to%20Speak%20Form.pdf and email it to the City Clerk: lasmith@cityofglenpool.com **PRIOR TO 6:00 PM MARCH 3, 2025.**

AGENDA

Page

A) **Call to Order - Joyce G. Calvert, Chair**

B) **Roll Call, Declaration of Quorum – Lesli Smith, Clerk; Joyce G. Calvert, Chair**

C) **EMS Report - Brian Cook, Director of Operations, Mercy Regional EMS**

1) GEMS EMS REPORT 01292025-02262025 — 3 - 6

D) **District Administrator Report -**

1) GEMS BancFirst Financials 01 January 2025
BAG CHECK (Engine 1 2025-02-21) — 7 - 30

BAG CHECK (R1 2025-02-21)

E) **Trustee Comments**

F) **Public Comments**

G) **Consideration and appropriate action relating to a request for approval of the Consent Agenda. (All matters listed under "Consent" are considered by the GEMS Board to be routine and will be enacted by one motion. Any Trustee may, however, remove an item from the Consent Agenda by request. A motion to adopt the consent Agenda is non-debatable.)**

1) Approval of the minutes from February 3, 2025, meeting. 31 - 32
GEMS - 03 Feb 2025 - Minutes - Pdf

2) Approval of purchase orders receiving report and payment claims as of February 26, 2025, totaling $31,983.80. 33 - 45
GEMS Packet 03-03-25

H) **Consideration and appropriate action relating to items removed from the Consent Agenda**

I) **Scheduled Business**

J) **Adjournment**

This notice and agenda was posted at Glenpool City Hall, 12205 S. Yukon Ave., Glenpool, Oklahoma, on February 28, 2025, at 11:30 am.
Signed: Lesli Smith
Clerk

Mercy Regional EMS

Brian Cook
Chief Operating Officer
PO Box 2398
Owasso, OK 74055
Office: 918.609.5827
Email: bcook@mercy-regional.com

To: Honorable Chair and GEMS Board Members

From: Brian Cook, Chief Operating Officer

Date: February 27, 2025

Ref: EMS Report January 29, 2025 – February 26, 2025

We logged 143 calls for service during this period while maintaining a 93% response time compliance.

93 patients were treated and transported.
20 patients refused transport.
8 cancelled prior to arrival.
9 Mutual aid received.
12 mutual aid given.
1 No patient found.

Brian Cook,
Chief Operating Officer

CRun	Call Date	Pick Up Location	Destination	Dispacthed	En Route	On Scene	Transport	Arrived	Clear	Response Time	Unit	
25-2258	1/29/2025 09:47	EMERGENCY SCENE	HILLCREST SOUTH	1/29/2025 09:47	1/29/2025 09:48	1/29/2025 09:51	1/29/2025 10:16	1/29/2025 10:41	1/29/2025 11:11	00:04:10	MEDIC 401	
25-2281	1/29/2025 13:34	EMERGENCY SCENE	ST. FRANCIS TULSA	1/29/2025 13:34	1/29/2025 13:35	1/29/2025 13:40	1/29/2025 13:58	1/29/2025 14:17	1/29/2025 14:37	00:06:13	MEDIC 401	
25-2309	1/29/2025 16:54	EMERGENCY SCENE	ST. JOHN TULSA	1/29/2025 16:55	1/29/2025 16:56	1/29/2025 16:59	1/29/2025 17:22	1/29/2025 17:42	1/29/2025 18:08	00:04:08	MEDIC 401	
25-2362	1/30/2025 06:02	EMERGENCY SCENE	ST. FRANCIS TULSA	1/30/2025 06:02	1/30/2025 06:06	1/30/2025 06:10	1/30/2025 06:20	1/30/2025 06:45	1/30/2025 07:12	00:08:10	MEDIC 401	
25-2369	1/30/2025 08:20	EMERGENCY SCENE	OSU MEDICAL CENTER	1/30/2025 08:21	1/30/2025 08:22	1/30/2025 08:38	1/30/2025 09:09	1/30/2025 09:42	1/30/2025 10:01	00:17:07	MUTUAL AID GIVEN	
25-2381	1/30/2025 10:20	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	1/30/2025 10:21	1/30/2025 10:21	1/30/2025 10:26	1/30/2025 11:06	1/30/2025 11:06	1/30/2025 11:06	00:05:34	MEDIC 401	
25-2393	1/30/2025 12:23	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	1/30/2025 12:23	1/30/2025 12:24	1/30/2025 12:27	1/30/2025 12:39	1/30/2025 12:39	1/30/2025 12:39	00:04:14	MEDIC 402	
25-2397	1/30/2025 12:23	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	1/30/2025 12:23	1/30/2025 12:24	1/30/2025 12:27	1/30/2025 12:39	1/30/2025 12:39	1/30/2025 12:39	00:04:14	MEDIC 402	
25-2402	1/30/2025 13:09	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED	
25-2404	1/30/2025 13:11	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED	
25-2458	1/31/2025 01:16	EMERGENCY SCENE	ST. FRANCIS TULSA	1/31/2025 01:16	1/31/2025 01:19	1/31/2025 01:25	1/31/2025 02:06	1/31/2025 02:30	1/31/2025 03:05	00:08:20	MEDIC 401	
25-2483	1/31/2025 08:38	EMERGENCY SCENE	ST. JOHN TULSA	1/31/2025 08:39	1/31/2025 08:39	1/31/2025 08:50	1/31/2025 09:34	1/31/2025 10:00	1/31/2025 10:50	00:11:40	MUTUAL AID GIVEN	
25-2490	1/31/2025 09:47	EMERGENCY SCENE	ST. FRANCIS TULSA	1/31/2025 09:47	1/31/2025 09:49	1/31/2025 09:56	1/31/2025 10:19	1/31/2025 10:37	1/31/2025 11:02	00:08:34	MEDIC 402	
25-2551	1/31/2025 17:50	EMERGENCY SCENE	ST. FRANCIS SOUTH	1/31/2025 17:51	1/31/2025 17:53	1/31/2025 18:01	1/31/2025 18:24	1/31/2025 18:50	1/31/2025 19:09	00:09:53	MEDIC 401	
25-2565	1/31/2025 22:41	EMERGENCY SCENE	HILLCREST SOUTH	1/31/2025 22:41	1/31/2025 22:45	1/31/2025 22:47	1/31/2025 23:34	1/31/2025 23:53	2/1/2025 00:50	00:06:02	MEDIC 401	
25-2590	2/1/2025 07:14	EMERGENCY SCENE	ST. FRANCIS TULSA	2/1/2025 07:15	2/1/2025 07:18	2/1/2025 07:21	2/1/2025 07:42	2/1/2025 08:03	2/1/2025 08:28	00:06:46	MEDIC 401	
25-2621	2/1/2025 13:26	EMERGENCY SCENE	ST. FRANCIS TULSA	2/1/2025 13:27	2/1/2025 13:30	2/1/2025 13:35	2/1/2025 13:48	2/1/2025 14:05	2/1/2025 14:23	00:07:49	MEDIC 401	
25-2636	2/1/2025 16:25	EMERGENCY SCENE	ST. FRANCIS TULSA	2/1/2025 16:26	2/1/2025 16:28	2/1/2025 16:34	2/1/2025 17:03	2/1/2025 17:25	2/1/2025 17:42	00:08:35	MEDIC 401	
25-2638	2/1/2025 16:37	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED	
25-2642	2/1/2025 17:51	EMERGENCY SCENE	SIGNED PD REFUSAL	2/1/2025 17:52	2/1/2025 17:53	2/1/2025 17:59	2/1/2025 18:13	2/1/2025 18:13	2/1/2025 18:13	00:07:35	MEDIC 401	
25-2652	2/1/2025 20:56	EMERGENCY SCENE	ST. FRANCIS TULSA	2/1/2025 20:56	2/1/2025 21:00	2/1/2025 21:08	2/1/2025 21:29	2/1/2025 21:44	2/1/2025 22:13	00:11:46	MEDIC 401	
25-2653	2/1/2025 21:10	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/1/2025 21:11	2/1/2025 21:13	2/1/2025 21:19	2/1/2025 21:35	2/1/2025 21:35	2/1/2025 21:35	00:08:03	MEDIC 402	
25-2665	2/2/2025 00:04	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/2/2025 00:05	2/2/2025 00:08	2/2/2025 00:11	2/2/2025 00:30	2/2/2025 00:38	2/2/2025 01:04	00:05:33	MEDIC 401	
25-2672	2/2/2025 04:01	EMERGENCY SCENE	ST. FRANCIS TULSA	2/2/2025 04:01	2/2/2025 04:06	2/2/2025 04:08	2/2/2025 04:31	2/2/2025 04:45	2/2/2025 05:14	00:07:00	MEDIC 401	
25-2720	2/2/2025 22:05	EMERGENCY SCENE	ST. FRANCIS TULSA	2/2/2025 22:06	2/2/2025 22:08	2/2/2025 22:11	2/2/2025 22:34	2/2/2025 22:54	2/2/2025 23:24	00:05:26	MEDIC 401	
25-2750	2/3/2025 09:32	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/3/2025 09:33	2/3/2025 09:35	2/3/2025 09:37	2/3/2025 09:44	2/3/2025 09:48	2/3/2025 10:06	00:04:20	MEDIC 401	
25-2772	2/3/2025 11:28	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/3/2025 11:29	2/3/2025 11:30	2/3/2025 11:33	2/3/2025 11:58	2/3/2025 11:58	2/3/2025 11:58	00:04:20	MEDIC 401	
25-2776	2/3/2025 11:40	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/3/2025 11:40	2/3/2025 11:42	2/3/2025 11:43	2/3/2025 12:03	2/3/2025 12:06	2/3/2025 12:17	00:03:29	MEDIC 103	
25-2821	2/3/2025 19:01	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/3/2025 19:01	2/3/2025 19:08	2/3/2025 19:08	2/3/2025 19:08	2/3/2025 19:08	2/3/2025 19:08	00:06:32	MEDIC 401	
25-2837	2/3/2025 23:07	EMERGENCY SCENE	ST. JOHN SAPULPA	2/3/2025 23:07	2/3/2025 23:10	2/3/2025 23:11	2/3/2025 23:23	2/3/2025 23:38	2/4/2025 00:17	00:03:33	MEDIC 401	
25-2879	2/4/2025 10:22	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/4/2025 10:22	2/4/2025 10:24	2/4/2025 10:32	2/4/2025 10:43	2/4/2025 10:43	2/4/2025 10:43	00:09:42	MEDIC 402	S of 181
25-2903	2/4/2025 12:59	EMERGENCY SCENE	ST. JOHN TULSA	2/4/2025 13:00	2/4/2025 13:01	2/4/2025 13:04	2/4/2025 13:25	2/4/2025 13:49	2/4/2025 14:16	00:04:36	MEDIC 401	
25-2927	2/4/2025 16:35	EMERGENCY SCENE	ST. FRANCIS TULSA	2/4/2025 16:35	2/4/2025 16:37	2/4/2025 16:40	2/4/2025 16:57	2/4/2025 17:26	2/4/2025 17:53	00:04:59	MEDIC 401	
25-2928	2/4/2025 16:37	EMERGENCY SCENE	ST. FRANCIS TULSA	2/4/2025 16:38	2/4/2025 16:39	2/4/2025 16:42	2/4/2025 16:51	2/4/2025 17:14	2/4/2025 17:26	00:04:27	MEDIC 402	
25-2943	2/4/2025 19:00	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/4/2025 19:01	2/4/2025 19:01	2/4/2025 19:09	2/4/2025 19:28	2/4/2025 19:28	2/4/2025 19:28	00:07:54	MEDIC 103	
25-2961	2/4/2025 22:32	EMERGENCY SCENE	ST. FRANCIS TULSA	2/4/2025 22:33	2/4/2025 22:36	2/4/2025 22:44	2/4/2025 23:06	2/4/2025 23:26	2/4/2025 23:47	00:11:36	MEDIC 401	
25-2962	2/4/2025 23:15	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/4/2025 23:16	2/4/2025 23:17	2/4/2025 23:22	2/4/2025 23:33	2/4/2025 23:53	2/5/2025 00:07	00:05:50	MEDIC 402	
25-2988	2/5/2025 08:38	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/5/2025 08:38	2/5/2025 08:40	2/5/2025 08:44	2/5/2025 09:11	2/5/2025 09:35	2/5/2025 10:01	00:06:02	MEDIC 401	
25-3014	2/5/2025 12:00	EMERGENCY SCENE	ST. FRANCIS TULSA	2/5/2025 12:00	2/5/2025 12:02	2/5/2025 12:07	2/5/2025 12:31	2/5/2025 12:55	2/5/2025 13:15	00:06:21	MEDIC 401	
25-3036	2/5/2025 14:55	EMERGENCY SCENE	ST. FRANCIS TULSA	2/5/2025 14:56	2/5/2025 14:57	2/5/2025 15:00	2/5/2025 15:20	2/5/2025 15:43	2/5/2025 16:06	00:04:28	MEDIC 503	
25-3065	2/5/2025 19:37	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/5/2025 19:37	2/5/2025 19:39	2/5/2025 19:43	2/5/2025 20:02	2/5/2025 20:28	2/5/2025 20:44	00:05:12	MEDIC 401	
25-3076	2/5/2025 22:07	EMERGENCY SCENE	ST. FRANCIS TULSA	2/5/2025 22:08	2/5/2025 22:10	2/5/2025 22:18	2/5/2025 22:37	2/5/2025 23:04	2/5/2025 23:34	00:09:59	MUTUAL AID GIVEN	
25-3118	2/6/2025 11:28	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/6/2025 11:28	2/6/2025 11:29	2/6/2025 11:33	2/6/2025 11:33	2/6/2025 11:33	2/6/2025 11:33	00:04:21	MEDIC 401	
25-3134	2/6/2025 13:08	EMERGENCY SCENE	HILLCREST SOUTH	2/6/2025 13:08	2/6/2025 13:10	2/6/2025 13:14	2/6/2025 13:30	2/6/2025 13:51	2/6/2025 15:33	00:05:55	MEDIC 401	
25-3188	2/7/2025 03:50	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/7/2025 03:51	2/7/2025 03:54	2/7/2025 03:58	2/7/2025 04:24	2/7/2025 04:48	2/7/2025 05:24	00:06:56	MEDIC 401	
25-3200	2/7/2025 07:51	EMERGENCY SCENE	ST. FRANCIS TULSA	2/7/2025 07:52	2/7/2025 07:54	2/7/2025 08:03	2/7/2025 08:14	2/7/2025 08:35	2/7/2025 09:05	00:11:06	MEDIC 401	
25-3216	2/7/2025 10:46	EMERGENCY SCENE	ST. JOHN SAPULPA	2/7/2025 10:47	2/7/2025 10:48	2/7/2025 10:53	2/7/2025 11:16	2/7/2025 11:31	2/7/2025 11:47	00:06:39	MEDIC 401	
25-3231	2/7/2025 12:31	EMERGENCY SCENE	ST. JOHN TULSA	2/7/2025 12:32	2/7/2025 12:32	2/7/2025 12:37	2/7/2025 12:52	2/7/2025 13:15	2/7/2025 13:41	00:05:09	MEDIC 401	
25-3267	2/7/2025 19:39	EMERGENCY SCENE	ST. FRANCIS TULSA	2/7/2025 19:39	2/7/2025 19:42	2/7/2025 19:45	2/7/2025 20:19	2/7/2025 20:41	2/7/2025 21:16	00:05:53	MEDIC 401	
25-3283	2/8/2025 01:56	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/8/2025 01:57	2/8/2025 02:01	2/8/2025 02:05	2/8/2025 02:34	2/8/2025 02:55	2/8/2025 03:34	00:08:10	MEDIC 401	
25-3289	2/8/2025 06:06	EMERGENCY SCENE		2/8/2025 06:06	2/8/2025 06:12	2/8/2025 06:15	2/8/2025 08:50	2/8/2025 08:50	2/8/2025 08:50	00:08:58	MEDIC 401	
25-3290	2/8/2025 06:13	EMERGENCY SCENE	ST. FRANCIS TULSA	2/8/2025 06:14	2/8/2025 06:17	2/8/2025 06:22	2/8/2025 07:26	2/8/2025 07:41	2/8/2025 08:44	00:08:22	MEDIC 103	
25-3308	2/8/2025 11:05	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/8/2025 11:06	2/8/2025 11:08	2/8/2025 11:13	2/8/2025 11:29	2/8/2025 11:29	2/8/2025 11:29	00:07:10	MEDIC 401	
25-3312	2/8/2025 11:38	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/8/2025 11:39	2/8/2025 11:42	2/8/2025 11:42	2/8/2025 11:59	2/8/2025 12:16	2/8/2025 12:50	00:03:09	MEDIC 401	
25-3351	2/8/2025 20:54	EMERGENCY SCENE	NO PATIENT FOUND	2/8/2025 20:54	2/8/2025 20:57	2/8/2025 21:03	2/8/2025 21:09	2/8/2025 21:09	2/8/2025 21:09	00:08:35	MEDIC 401	
25-3364	2/9/2025 01:05	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/9/2025 01:05	2/9/2025 01:08	2/9/2025 01:09	2/9/2025 01:21	2/9/2025 01:21	2/9/2025 01:21	00:04:02	MEDIC 401	
25-3366	2/9/2025 01:34	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/9/2025 01:35	2/9/2025 01:36	2/9/2025 01:38	2/9/2025 01:41	2/9/2025 01:41	2/9/2025 01:41	00:03:13	MEDIC 401	
25-3382	2/9/2025 09:17	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/9/2025 09:18	2/9/2025 09:20	2/9/2025 09:24	2/9/2025 09:38	2/9/2025 09:58	2/9/2025 10:14	00:06:16	MEDIC 401	

25-3384	2/9/2025 10:24	EMERGENCY SCENE	ST. FRANCIS TULSA	2/9/2025 10:24	2/9/2025 10:26	2/9/2025 10:28	2/9/2025 10:56	2/9/2025 11:17	2/9/2025 11:30	00:03:38	MEDIC 402
25-3389	2/9/2025 11:50	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/9/2025 11:50	2/9/2025 11:52	2/9/2025 11:55	2/9/2025 13:03	2/9/2025 13:03	2/9/2025 13:03	00:05:24	MEDIC 401
25-3396	2/9/2025 13:23	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/9/2025 13:24	2/9/2025 13:26	2/9/2025 13:31	2/9/2025 14:09	2/9/2025 14:28	2/9/2025 14:54	00:07:03	MEDIC 401
25-3400	2/9/2025 14:13	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED
25-3404	2/9/2025 14:50	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/9/2025 14:50	2/9/2025 14:52	2/9/2025 14:58	2/9/2025 15:43	2/9/2025 15:43	2/9/2025 15:44	00:08:12	MEDIC 402
25-3437	2/9/2025 20:59	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/9/2025 20:59	2/9/2025 21:02	2/9/2025 21:06	2/9/2025 21:27	2/9/2025 21:27	2/9/2025 21:27	00:06:28	MEDIC 401
25-3463	2/10/2025 07:24	EMERGENCY SCENE	ST. FRANCIS TULSA	2/10/2025 07:24	2/10/2025 07:27	2/10/2025 07:32	2/10/2025 07:49	2/10/2025 08:19	2/10/2025 08:44	00:08:22	MEDIC 401
25-3470	2/10/2025 08:51	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/10/2025 08:52	2/10/2025 08:54	2/10/2025 08:55	2/10/2025 09:16	2/10/2025 09:33	2/10/2025 09:56	00:03:09	MEDIC 402
25-3486	2/10/2025 11:25	EMERGENCY SCENE	ST. FRANCIS TULSA	2/10/2025 11:25	2/10/2025 11:27	2/10/2025 11:30	2/10/2025 12:08	2/10/2025 12:30	2/10/2025 13:02	00:04:48	MEDIC 401
25-3514	2/10/2025 16:07	EMERGENCY SCENE	ST. FRANCIS TULSA	2/10/2025 16:07	2/10/2025 16:08	2/10/2025 16:14	2/10/2025 16:21	2/10/2025 16:42	2/10/2025 17:10	00:06:20	MEDIC 401
25-3549	2/11/2025 06:14	EMERGENCY SCENE	ST. FRANCIS TULSA	2/11/2025 06:15	2/11/2025 06:18	2/11/2025 06:25	2/11/2025 06:39	2/11/2025 06:56	2/11/2025 07:12	00:09:40	MEDIC 401
25-3589	2/11/2025 15:02	EMERGENCY SCENE	ST. JOHN TULSA	2/11/2025 15:02	2/11/2025 15:04	2/11/2025 15:07	2/11/2025 15:30	2/11/2025 15:55	2/11/2025 16:26	00:04:52	MEDIC 401
25-3594	2/11/2025 16:21	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/11/2025 16:22	2/11/2025 16:24	2/11/2025 16:27	2/11/2025 16:37	2/11/2025 16:37	2/11/2025 16:37	00:05:07	MEDIC 402
25-3602	2/11/2025 18:19	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/11/2025 18:19	2/11/2025 18:21	2/11/2025 18:24	2/11/2025 18:49	2/11/2025 19:12	2/11/2025 19:42	00:04:41	MEDIC 401
25-3607	2/11/2025 19:34	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED
25-3608	2/11/2025 19:42	EMERGENCY SCENE	ST. JOHN TULSA	2/11/2025 19:43	2/11/2025 19:44	2/11/2025 20:03	2/11/2025 20:43	2/11/2025 21:16	2/11/2025 21:40	00:19:45	MUTUAL AID GIVEN
25-3632	2/12/2025 05:55	EMERGENCY SCENE	ST. FRANCIS TULSA	2/12/2025 05:56	2/12/2025 05:59	2/12/2025 06:04	2/12/2025 06:30	2/12/2025 06:52	2/12/2025 07:25	00:07:37	MEDIC 401
25-3649	2/12/2025 08:00	EMERGENCY SCENE	ST. FRANCIS TULSA	2/12/2025 08:00	2/12/2025 08:01	2/12/2025 08:05	2/12/2025 08:28	2/12/2025 08:33	2/12/2025 08:51	00:04:55	MEDIC 401
25-3677	2/12/2025 12:12	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/12/2025 12:13	2/12/2025 12:14	2/12/2025 12:19	2/12/2025 12:41	2/12/2025 13:07	2/12/2025 13:42	00:06:00	MEDIC 401
25-3686	2/12/2025 13:27	EMERGENCY SCENE	ST. FRANCIS TULSA	2/12/2025 13:27	2/12/2025 13:29	2/12/2025 13:32	2/12/2025 13:49	2/12/2025 14:11	2/12/2025 14:28	00:05:14	MEDIC 402
25-3693	2/12/2025 14:25	EMERGENCY SCENE	ST. FRANCIS TULSA	2/12/2025 14:25	2/12/2025 14:26	2/12/2025 14:29	2/12/2025 14:56	2/12/2025 15:21	2/12/2025 15:39	00:04:31	MEDIC 401
25-3704	2/12/2025 15:33	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/12/2025 15:33	2/12/2025 15:33	2/12/2025 15:33	2/12/2025 15:51	2/12/2025 15:51	2/12/2025 15:51	00:00:39	MEDIC 402
25-3707	2/12/2025 15:42	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/12/2025 15:42	2/12/2025 15:43	2/12/2025 15:50	2/12/2025 16:12	2/12/2025 16:36	2/12/2025 17:18	00:08:03	MEDIC 103
25-3712	2/12/2025 16:20	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/12/2025 16:21	2/12/2025 16:22	2/12/2025 16:25	2/12/2025 16:25	2/12/2025 16:25	2/12/2025 16:25	00:04:36	MUTUAL AID GIVEN
25-3741	2/12/2025 21:33	EMERGENCY SCENE	ST. JOHN TULSA	2/12/2025 21:33	2/12/2025 21:35	2/12/2025 21:39	2/12/2025 22:15	2/12/2025 22:41	2/12/2025 23:10	00:06:05	MEDIC 401
25-3743	2/12/2025 22:52	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED
25-3746	2/13/2025 02:32	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/13/2025 02:32	2/13/2025 02:35	2/13/2025 02:38	2/13/2025 03:00	2/13/2025 03:19	2/13/2025 03:45	00:05:50	MEDIC 401
25-3797	2/13/2025 13:04	EMERGENCY SCENE	ST. FRANCIS TULSA	2/13/2025 13:04	2/13/2025 13:05	2/13/2025 13:10	2/13/2025 13:35	2/13/2025 13:58	2/13/2025 14:30	00:05:45	MEDIC 401
25-3827	2/13/2025 19:48	EMERGENCY SCENE	ST. FRANCIS TULSA	2/13/2025 19:49	2/13/2025 19:50	2/13/2025 19:55	2/13/2025 20:04	2/13/2025 20:26	2/13/2025 20:57	00:05:38	MEDIC 401
25-3832	2/13/2025 22:26	EMERGENCY SCENE	ST. FRANCIS TULSA	2/13/2025 22:29	2/13/2025 22:31	2/13/2025 22:39	2/13/2025 22:57	2/13/2025 23:21	2/13/2025 23:34	00:10:05	MUTUAL AID GIVEN
25-3849	2/14/2025 07:35	EMERGENCY SCENE	ST. JOHN TULSA	2/14/2025 07:37	2/14/2025 07:40	2/14/2025 07:43	2/14/2025 07:59	2/14/2025 08:21	2/14/2025 08:58	00:06:43	MEDIC 401
25-3855	2/14/2025 08:46	EMERGENCY SCENE	CANCELLED ENROUTE	2/14/2025 08:48	2/14/2025 08:48	2/14/2025 08:55	2/14/2025 08:55	2/14/2025 08:55	2/14/2025 08:55	00:07:13	MEDIC 402
25-3861	2/14/2025 09:24	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/14/2025 09:24	2/14/2025 09:27	2/14/2025 09:33	2/14/2025 09:47	2/14/2025 10:04	2/14/2025 10:27	00:09:00	MEDIC 401
25-3891	2/14/2025 14:12	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/14/2025 14:12	2/14/2025 14:14	2/14/2025 14:18	2/14/2025 14:34	2/14/2025 15:00	2/14/2025 15:49	00:05:23	MEDIC 401
25-3928	2/14/2025 19:30	EMERGENCY SCENE	UNK								MUTUAL AID RECIEVED
25-3945	2/14/2025 22:26	EMERGENCY SCENE	ST. JOHN SAPULPA	2/14/2025 22:27	2/14/2025 22:29	2/14/2025 22:33	2/14/2025 22:43	2/14/2025 23:03	2/14/2025 23:17	00:06:15	MEDIC 401
25-3950	2/15/2025 03:27	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/15/2025 03:27	2/15/2025 03:28	2/15/2025 03:28	2/15/2025 03:28	2/15/2025 03:28	2/15/2025 03:28	00:00:40	MEDIC 401
25-3954	2/15/2025 04:52	EMERGENCY SCENE	ST. JOHN TULSA	2/15/2025 04:53	2/15/2025 04:59	2/15/2025 05:03	2/15/2025 05:18	2/15/2025 05:36	2/15/2025 05:53	00:10:09	MEDIC 401
25-3966	2/15/2025 06:42	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/15/2025 06:43	2/15/2025 06:45	2/15/2025 06:50	2/15/2025 07:07	2/15/2025 07:07	2/15/2025 07:07	00:06:55	MEDIC 401
25-4007	2/15/2025 17:06	EMERGENCY SCENE	ST. FRANCIS CHILDRENS HOSPI	2/15/2025 17:07	2/15/2025 17:10	2/15/2025 17:15	2/15/2025 17:34	2/15/2025 17:54	2/15/2025 18:18	00:08:11	MEDIC 401
25-4013	2/15/2025 18:04	EMERGENCY SCENE	MUTUAL AID								MUTUAL AID RECIEVED
25-4018	2/15/2025 18:47	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/15/2025 18:48	2/15/2025 18:49	2/15/2025 18:52	2/15/2025 19:13	2/15/2025 19:22	2/15/2025 19:39	00:04:21	MEDIC 401
25-4033	2/16/2025 01:39	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/16/2025 01:40	2/16/2025 01:42	2/16/2025 01:45	2/16/2025 02:02	2/16/2025 02:08	2/16/2025 02:34	00:05:05	MEDIC 401
25-4073	2/16/2025 14:38	EMERGENCY SCENE	ST. FRANCIS TULSA	2/16/2025 14:39	2/16/2025 14:41	2/16/2025 14:43	2/16/2025 14:57	2/16/2025 15:17	2/16/2025 15:32	00:04:19	MEDIC 401
25-4086	2/16/2025 19:34	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/16/2025 19:34	2/16/2025 19:36	2/16/2025 19:38	2/16/2025 19:56	2/16/2025 19:56	2/16/2025 19:56	00:04:10	MEDIC 401
25-4088	2/16/2025 20:18	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/16/2025 20:19	2/16/2025 20:20	2/16/2025 20:25	2/16/2025 20:39	2/16/2025 20:39	2/16/2025 20:39	00:06:32	MEDIC 401
25-4092	2/16/2025 22:57	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/16/2025 22:57	2/16/2025 23:01	2/16/2025 23:05	2/16/2025 23:16	2/16/2025 23:16	2/16/2025 23:16	00:07:26	MEDIC 401
25-4093	2/17/2025 00:00	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/17/2025 00:01	2/17/2025 00:05	2/17/2025 00:12	2/17/2025 00:39	2/17/2025 00:55	2/17/2025 01:19	00:10:46	MEDIC 401
25-4104	2/17/2025 08:37	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/17/2025 08:38	2/17/2025 08:39	2/17/2025 08:43	2/17/2025 08:49	2/17/2025 08:57	2/17/2025 09:09	00:04:57	MEDIC 401
25-4118	2/17/2025 11:37	EMERGENCY SCENE	HILLCREST SOUTH	2/17/2025 11:38	2/17/2025 11:39	2/17/2025 11:43	2/17/2025 11:52	2/17/2025 12:08	2/17/2025 13:30	00:04:49	MEDIC 401
25-4160	2/17/2025 17:38	EMERGENCY SCENE	HILLCREST SOUTH	2/17/2025 17:39	2/17/2025 17:41	2/17/2025 17:45	2/17/2025 17:57	2/17/2025 18:18	2/17/2025 19:06	00:05:32	MEDIC 401
25-4169	2/17/2025 19:51	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/17/2025 19:52	2/17/2025 19:53	2/17/2025 19:58	2/17/2025 20:18	2/17/2025 20:40	2/17/2025 20:59	00:06:12	MEDIC 401
25-4193	2/18/2025 08:14	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/18/2025 08:15	2/18/2025 08:17	2/18/2025 08:29	2/18/2025 08:41	2/18/2025 08:55	2/18/2025 09:07	00:14:46	MUTUAL AID GIVEN
25-4219	2/18/2025 18:23	EMERGENCY SCENE	ST. FRANCIS TULSA	2/18/2025 18:23	2/18/2025 18:25	2/18/2025 18:31	2/18/2025 18:57	2/18/2025 19:34	2/18/2025 19:59	00:07:14	MEDIC 401
25-4239	2/19/2025 02:28	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/19/2025 02:28	2/19/2025 02:30	2/19/2025 02:36	2/19/2025 03:00	2/19/2025 03:47	2/19/2025 04:11	00:07:45	MEDIC 401
25-4260	2/19/2025 10:26	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/19/2025 10:27	2/19/2025 10:27	2/19/2025 10:48	2/19/2025 10:48	2/19/2025 10:48	2/19/2025 10:48	00:21:22	MUTUAL AID GIVEN
25-4285	2/19/2025 14:14	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/19/2025 14:15	2/19/2025 14:18	2/19/2025 14:20	2/19/2025 14:26	2/19/2025 14:26	2/19/2025 14:26	00:05:08	MEDIC 401
25-4299	2/19/2025 15:58	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/19/2025 15:59	2/19/2025 16:01	2/19/2025 16:07	2/19/2025 16:26	2/19/2025 16:50	2/19/2025 17:21	00:08:01	MEDIC 401
25-4309	2/19/2025 17:13	EMERGENCY SCENE	ST. FRANCIS TULSA	2/19/2025 17:13	2/19/2025 17:14	2/19/2025 17:19	2/19/2025 17:37	2/19/2025 18:10	2/19/2025 18:48	00:06:20	MEDIC 402

25-4330	2/20/2025 03:07	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/20/2025 03:08	2/20/2025 03:12	2/20/2025 03:18	2/20/2025 03:38	2/20/2025 03:38	2/20/2025 03:38	00:09:54	MEDIC 401
25-4348	2/20/2025 08:33	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SE	2/20/2025 08:33	2/20/2025 08:35	2/20/2025 08:35	2/20/2025 08:35	2/20/2025 08:35	2/20/2025 08:35	00:01:45	MUTUAL AID GIVEN
25-4453	2/21/2025 12:18	EMERGENCY SCENE	CANCELLED ENROUTE BY DISPA	2/21/2025 12:19	2/21/2025 12:20	2/21/2025 12:33	2/21/2025 12:33	2/21/2025 12:33	2/21/2025 12:33	00:14:17	MUTUAL AID GIVEN
25-4499	2/21/2025 17:59	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/21/2025 18:00	2/21/2025 18:02	2/21/2025 18:05	2/21/2025 18:16	2/21/2025 18:16	2/21/2025 18:16	00:05:29	MEDIC 401
25-4501	2/21/2025 17:59	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/21/2025 18:00	2/21/2025 18:02	2/21/2025 18:05	2/21/2025 18:16	2/21/2025 18:16	2/21/2025 18:16	00:05:29	MEDIC 401
25-4518	2/22/2025 01:30	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	2/22/2025 01:30	2/22/2025 01:34	2/22/2025 01:38	2/22/2025 01:55	2/22/2025 02:03	2/22/2025 02:21	00:08:24	MEDIC 401
25-4540	2/22/2025 08:16	EMERGENCY SCENE	ST. JOHN TULSA	2/22/2025 08:16	2/22/2025 08:17	2/22/2025 08:20	2/22/2025 08:39	2/22/2025 09:00	2/22/2025 09:15	00:03:52	MEDIC 401
25-4552	2/22/2025 12:31	EMERGENCY SCENE	ST. FRANCIS TULSA	2/22/2025 12:31	2/22/2025 12:34	2/22/2025 12:40	2/22/2025 13:01	2/22/2025 13:27	2/22/2025 13:51	00:08:16	MEDIC 401
25-4553	2/22/2025 12:37	EMERGENCY SCENE	CANCELLED ENROUTE BY DISPA	2/22/2025 12:38	2/22/2025 12:41	2/22/2025 12:49	2/22/2025 12:49	2/22/2025 12:49	2/22/2025 12:49	00:11:01	MUTUAL AID GIVEN
25-4597	2/22/2025 23:15	EMERGENCY SCENE	ST. FRANCIS TULSA	2/22/2025 23:15	2/22/2025 23:18	2/22/2025 23:20	2/22/2025 23:54	2/23/2025 00:11	2/23/2025 00:40	00:04:50	MEDIC 401
25-4633	2/23/2025 15:24	EMERGENCY SCENE	ST. FRANCIS TULSA	2/23/2025 15:25	2/23/2025 15:27	2/23/2025 15:30	2/23/2025 15:45	2/23/2025 16:10	2/23/2025 17:27	00:05:07	MEDIC 401
25-4669	2/24/2025 03:58	EMERGENCY SCENE	ST. FRANCIS TULSA	2/24/2025 03:59	2/24/2025 04:03	2/24/2025 04:08	2/24/2025 04:32	2/24/2025 04:50	2/24/2025 05:12	00:09:07	MEDIC 401
25-4678	2/24/2025 07:40	EMERGENCY SCENE	ST. FRANCIS TULSA	2/24/2025 07:41	2/24/2025 07:43	2/24/2025 07:45	2/24/2025 08:14	2/24/2025 08:43	2/24/2025 08:56	00:03:50	MEDIC 401
25-4720	2/24/2025 15:09	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	2/24/2025 15:10	2/24/2025 15:11	2/24/2025 15:13	2/24/2025 15:26	2/24/2025 15:26	2/24/2025 15:26	00:03:13	MEDIC 401
25-4736	2/24/2025 16:49	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/24/2025 16:49	2/24/2025 16:51	2/24/2025 16:55	2/24/2025 17:06	2/24/2025 17:30	2/24/2025 17:41	00:05:19	MEDIC 401
25-4742	2/24/2025 18:54	EMERGENCY SCENE	ST. FRANCIS TULSA	2/24/2025 18:55	2/24/2025 18:57	2/24/2025 19:01	2/24/2025 19:19	2/24/2025 19:48	2/24/2025 20:11	00:05:45	MEDIC 401
25-4744	2/24/2025 19:52	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/24/2025 19:52	2/24/2025 19:53	2/24/2025 19:58	2/24/2025 20:13	2/24/2025 20:36	2/24/2025 21:01	00:06:02	MEDIC 402
25-4806	2/25/2025 10:59	EMERGENCY SCENE	ST. FRANCIS TULSA	2/25/2025 10:59	2/25/2025 11:01	2/25/2025 11:04	2/25/2025 11:27	2/25/2025 11:51	2/25/2025 12:14	00:04:15	MEDIC 401
25-4821	2/25/2025 13:06	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/25/2025 13:06	2/25/2025 13:07	2/25/2025 13:13	2/25/2025 13:37	2/25/2025 13:56	2/25/2025 14:36	00:07:04	MEDIC 401
25-4853	2/25/2025 17:40	EMERGENCY SCENE	ST. FRANCIS SOUTH	2/25/2025 17:40	2/25/2025 17:42	2/25/2025 17:45	2/25/2025 18:14	2/25/2025 18:39	2/25/2025 19:10	00:05:02	MEDIC 401
25-4854	2/25/2025 17:42	EMERGENCY SCENE	MUTUAL AID								MUTUAL AID RECIEVED
25-4876	2/26/2025 00:31	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	2/26/2025 00:31	2/26/2025 00:32	2/26/2025 00:39	2/26/2025 01:27	2/26/2025 01:54	2/26/2025 02:16	00:07:46	MEDIC 401
25-4912	2/26/2025 11:23	EMERGENCY SCENE	HILLCREST SOUTH	2/26/2025 11:23	2/26/2025 11:25	2/26/2025 11:38	2/26/2025 11:55	2/26/2025 12:12	2/26/2025 12:53	00:14:55	MUTUAL AID GIVEN
25-4915	2/26/2025 12:25	EMERGENCY SCENE	ST. FRANCIS TULSA	2/26/2025 12:26	2/26/2025 12:28	2/26/2025 12:32	2/26/2025 13:22	2/26/2025 13:43	2/26/2025 14:15	00:06:13	MEDIC 402
25-4924	2/26/2025 13:27	EMERGENCY SCENE	OSU MEDICAL CENTER	2/26/2025 13:27	2/26/2025 13:29	2/26/2025 13:32	2/26/2025 13:47	2/26/2025 14:09	2/26/2025 14:23	00:05:04	MEDIC 401
25-4962	2/26/2025 22:47	EMERGENCY SCENE	ST. FRANCIS TULSA	2/26/2025 22:49	2/26/2025 22:50	2/26/2025 22:53	2/26/2025 23:13	2/26/2025 23:38	2/27/2025 00:10	00:04:32	MEDIC 401

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PO BOX 1089
GLENPOOL, OK 74033-1089
(918) 322-9015

BancFirst Loyal
To Oklahoma & You.℠

24-Hour Automated Account Information
1-877-602-2262

2 *0008828
GLENPOOL AREA EMERGENCY MEDICAL
SERVICE DISTRICT
12205 S YUKON AVE
GLENPOOL OK 74033-6635

ACCOUNT NUMBER [redacted]
STATEMENT DATE 1/31/25

PRIVACY NOTICE
Federal law requires us to tell you how we collect, share, and protect your personal information. Our privacy policy has not changed and you may review our policy and practices with respect to your personal information at www.bancfirst.bank or we can mail you a free copy upon request by calling us at 405-273-1000 or your local BancFirst location.

8001-00000

ACCOUNT ANALYSIS

Beginning Balance	1/01/25		152,459.22
Deposits / Misc Credits		1	324,632.86
Withdrawals / Misc Debits		4	30,198.36
** Ending Balance	1/31/25		446,893.72 **

****

Service Charge	.00
Enclosures	4

DEPOSITS

Date	Deposits	Withdrawals	Activity Description
1/16	324,632.86		TULSA COUNTY/REMIT

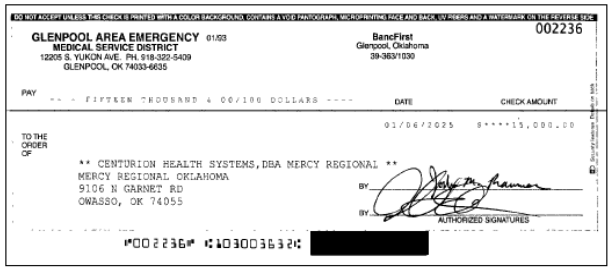
CHECKS

* indicates skip in check numbers

Date	Check No.	Amount	Date	Check No.	Amount	Date	Check No.	Amount
1/17	2236	15,000.00	1/22	2238	208.33	1/15	2239	208.33
1/13	2237	14,781.70						

DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
1/13	137,677.52	1/16	462,102.05	1/22	446,893.72
1/15	137,469.19	1/17	447,102.05		


GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BancFirst
Glenpool, Oklahoma
39-363/1030

002236

PAY - - - FIFTEEN THOUSAND & 00/100 DOLLARS - - - -

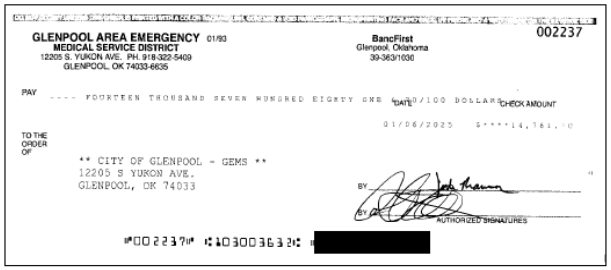
DATE 01/06/2025 CHECK AMOUNT $****15,000.00

TO THE ORDER OF
** CENTURION HEALTH SYSTEMS,DBA MERCY REGIONAL **
MERCY REGIONAL OKLAHOMA
9106 N GARNET RD
OWASSO, OK 74055

AUTHORIZED SIGNATURES

⑈002236⑈ ⑆103003632⑆ [redacted]

Number: 2236 Date: 1/17/2025 Amount: $15000.00


GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BancFirst
Glenpool, Oklahoma
39-363/1030

002237

PAY - - - - FOURTEEN THOUSAND SEVEN HUNDRED EIGHTY ONE & 70/100 DOLLARS - - - -

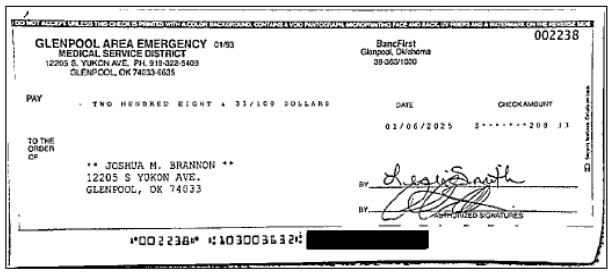
DATE 01/06/2025 CHECK AMOUNT $****14,781.70

TO THE ORDER OF
** CITY OF GLENPOOL - GEMS **
12205 S YUKON AVE.
GLENPOOL, OK 74033

AUTHORIZED SIGNATURES

⑈002237⑈ ⑆103003632⑆ [redacted]

Number: 2237 Date: 1/13/2025 Amount: $14781.70


GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BancFirst
Glenpool, Oklahoma
39-363/1030

002238

PAY - TWO HUNDRED EIGHT & 33/100 DOLLARS

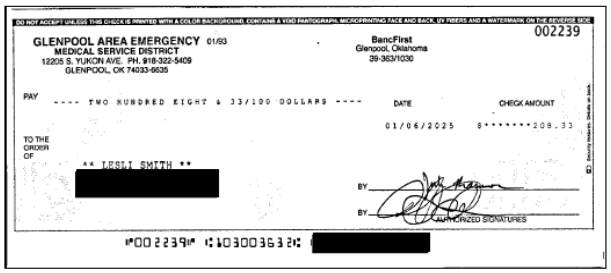
DATE 01/06/2025 CHECK AMOUNT $*******208.33

TO THE ORDER OF
** JOSHUA M. BRANNON **
12205 S YUKON AVE.
GLENPOOL, OK 74033

AUTHORIZED SIGNATURES

⑈002238⑈ ⑆103003632⑆ [redacted]

Number: 2238 Date: 1/22/2025 Amount: $208.33


GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BancFirst
Glenpool, Oklahoma
39-363/1030

002239

PAY - - - - TWO HUNDRED EIGHT & 33/100 DOLLARS - - - -

DATE 01/06/2025 CHECK AMOUNT $*******208.33

TO THE ORDER OF
** LESLI SMITH **
[redacted]

AUTHORIZED SIGNATURES

⑈002239⑈ ⑆103003632⑆ [redacted]

Number: 2239 Date: 1/15/2025 Amount: $208.33

4021-00000

PERIOD: 1/01/2025 - 1/31/2025

ACCOUNT: 31-1001 GEMS CASH IN BANK

RECONCILIATION SUMMARY

BEGINNING STATEMENT BALANCE:		152,459.22	GL ACCOUNT BALANCE:		446,893.72
DEPOSITS:	+	324,632.86	OUTSTANDING DEPOSITS:	-	0.00
WITHDRAWALS:	+	30,198.36CR	OUTSTANDING CHECKS:	-	0.00
ADJUSTMENTS:	+	0.00	ADJUSTMENTS:	+	0.00
ENDING STATEMENT BALANCE:		446,893.72	ADJUSTED GL ACCOUNT BALANCE:		446,893.72

STATEMENT BALANCE: 446,893.72
BANK DIFFERENCE: 0.00
G/L DIFFERENCE: 0.00

CLEARED DEPOSITS:

1/16/2025	Dec GEMS TAX DEP FROM TC	324,632.86
TOTAL CLEARED DEPOSITS:		324,632.86

CLEARED CHECKS:

1/06/2025	002236	CENTURION HEALTH SYSTEMS,DBA M	15,000.00CR
1/06/2025	002237	CITY OF GLENPOOL - GEMS	14,781.70CR
1/06/2025	002238	JOSHUA M. BRANNON	208.33CR
1/06/2025	002239	LESLI SMITH	208.33CR
TOTAL CLEARED CHECKS:			30,198.36CR

CLEARED OTHER:
No Items.

BALANCE SHEET
AS OF: JANUARY 31ST, 2025

31 -GEMS

ACCOUNT #	ACCOUNT DESCRIPTION	BALANCE		
ASSETS				
======				
31-1001	GEMS CASH IN BANK	446,893.72		
31-1302	PREPAID PAYROLL TAXES	0.00		
31-1303	TAXES RECEIVABLE	0.00		
31-1353	EQUIPMENT	71,085.14		
31-1354	ACCUM DEPREC - EQUIPMENT	(42,651.08)		
			475,327.78	
	TOTAL ASSETS			475,327.78
				==========
LIABILITIES				
==========				
31-2001	ACCOUNTS PAYABLE	0.00		
31-2101	FICA LIABILITY	0.00		
31-2102	MED TAX LIABILITY	0.00		
31-2103	FEDERAL W/H PAYABLE	0.00		
31-2104	STATE W/H PAYABLE	0.00		
31-2130	OPEB LIABILITY	0.00		
31-2131	DEFERRED INFLOWS	0.00		
	TOTAL LIABILITIES		0.00	
EQUITY				
======				
31-3001	FUND BALANCE	334,818.20		
	TOTAL BEGINNING EQUITY	334,818.20		
	TOTAL REVENUE	351,682.24		
	TOTAL EXPENSES	211,172.66		
	TOTAL REVENUE OVER/(UNDER) EXPENSES	140,509.58		
	TOTAL EQUITY & REV. OVER/(UNDER) EXP.		475,327.78	
	TOTAL LIABILITIES, EQUITY & REV.OVER/(UNDER) EXP.			475,327.78
				==========

PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
AS OF:JANUARY 31ST, 2025

31 -GEMS
FINANCIAL SUMMARY % OF YEAR COMPLETED: 58.33

	CURRENT BUDGET	CURRENT PERIOD	PRIOR YEAR PO ADJUST.	Y-T-D ACTUAL	Y-T-D ENCUMBRANCE	BUDGET BALANCE	% OF BUDGET
REVENUE SUMMARY							
NON-DEPARTMENTAL	423,904.00	324,632.86	0.00	351,682.24	0.00	72,221.76	82.96
TOTAL REVENUES	423,904.00	324,632.86	0.00	351,682.24	0.00	72,221.76	82.96
EXPENDITURE SUMMARY							
GEMS	423,904.00	30,198.36	0.00	211,172.66	32,988.11	179,743.23	57.60
TOTAL EXPENDITURES	423,904.00	30,198.36	0.00	211,172.66	32,988.11	179,743.23	57.60
REVENUE OVER/(UNDER) EXPENDITURES	0.00	294,434.50	0.00	140,509.58	(32,988.11)	0.00	0.00

PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
AS OF:JANUARY 31ST, 2025

31 -GEMS

% OF YEAR COMPLETED: 58.33

REVENUES	CURRENT BUDGET	CURRENT PERIOD	PRIOR YEAR PO ADJUST.	Y-T-D ACTUAL	Y-T-D ENCUMBRANCE	BUDGET BALANCE	% OF BUDGET
NON-DEPARTMENTAL							
TAXES							
31-5-00-5006 TAXES	385,000.00	324,632.86	0.00	351,682.24	0.00	33,317.76	91.35
TOTAL TAXES	385,000.00	324,632.86	0.00	351,682.24	0.00	33,317.76	91.35
INVESTMENT INCOME							
31-5-00-5301 INTEREST	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31-5-00-5306 MISCELLANEOUS	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL INVESTMENT INCOME	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OTHER FINANCING SOURCES							
31-5-00-5409 USE OF FUND BALANCE	38,904.00	0.00	0.00	0.00	0.00	38,904.00	0.00
TOTAL OTHER FINANCING SOURCES	38,904.00	0.00	0.00	0.00	0.00	38,904.00	0.00
TOTAL NON-DEPARTMENTAL	423,904.00	324,632.86	0.00	351,682.24	0.00	72,221.76	82.96
** TOTAL REVENUES **	423,904.00	324,632.86	0.00	351,682.24	0.00	72,221.76	82.96

PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
AS OF:JANUARY 31ST, 2025

31 -GEMS

% OF YEAR COMPLETED: 58.33

DEPARTMENTAL EXPENDITURES	CURRENT BUDGET	CURRENT PERIOD	PRIOR YEAR PO ADJUST.	Y-T-D ACTUAL	Y-T-D ENCUMBRANCE	BUDGET BALANCE	% OF BUDGET
GEMS							
PERSONAL SERVICES							
31-6-01-6101 SALARIES & WAGES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31-6-01-6102 INSURANCE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31-6-01-6111 FICA	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31-6-01-6113 WORKMANS COMP	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31-6-01-6114 UNEMPLOYMENT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL PERSONAL SERVICES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUPPLIES							
31-6-01-6202 OPERATING SUPPLIES	4,500.00	0.00	0.00	3,919.03	0.00	580.97	87.09
31-6-01-6206 MINOR EQUIPMENT	2,500.00	0.00	0.00	0.00	0.00	2,500.00	0.00
TOTAL SUPPLIES	7,000.00	0.00	0.00	3,919.03	0.00	3,080.97	55.99
OTHER CHARGES & SERVICES							
31-6-01-6210 AMBULANCE CONTRACT	180,000.00	15,000.00	0.00	105,000.00	15,000.00	60,000.00	66.67
31-6-01-6225 FIRST RESPONDER/ADMIN FEES	177,379.00	14,781.70	0.00	99,402.84	17,571.45	60,404.71	65.95
31-6-01-6235 CONTRACT SERVICES	13,800.00	416.66	0.00	2,850.79	416.66	10,532.55	23.68
31-6-01-6236 AUDIT FEES	39,225.00	0.00	0.00	0.00	0.00	39,225.00	0.00
31-6-01-6254 MISC SERVICES & CHARGES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL OTHER CHARGES & SERVICES	410,404.00	30,198.36	0.00	207,253.63	32,988.11	170,162.26	58.54
TRAVEL & TRAINING							
31-6-01-6262 TRAVEL AND TRAINING	6,500.00	0.00	0.00	0.00	0.00	6,500.00	0.00
TOTAL TRAVEL & TRAINING	6,500.00	0.00	0.00	0.00	0.00	6,500.00	0.00
MISCELLANEOUS							
31-6-01-6283 INVESTMENT EXPENSES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL MISCELLANEOUS	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CAPITAL EXPENDITURES							
31-6-01-6333 CAPITAL PURCHASES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL CAPITAL EXPENDITURES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OTHER FINANCING USES							
31-6-01-6745 TSF TO RESERVES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL OTHER FINANCING USES	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL GEMS	423,904.00	30,198.36	0.00	211,172.66	32,988.11	179,743.23	57.60
TOTAL EXPENDITURES	423,904.00	30,198.36	0.00	211,172.66	32,988.11	179,743.23	57.60
REVENUE OVER/(UNDER) EXPENDITURES	0.00	294,434.50	0.00	140,509.58	(32,988.11)	(107,521.47)	0.00

Month	FY2025	FY2024	FY2023	FY2022	FY2021	FY2020	FY2019
July	0.2%	0.1%	0.3%	0.4%	0.5%	0.3%	0.3%
August	0.5%	0.3%	0.4%	0.6%	0.6%	0.7%	0.5%
September	0.8%	0.6%	0.5%	0.8%	0.8%	0.7%	1.0%
October	1.0%	1.0%	1.4%	1.2%	1.0%	1.1%	1.3%
November	1.2%	1.3%	1.5%	1.3%	1.2%	1.2%	1.4%
December	7.0%	6.1%	5.4%	4.6%	5.9%	4.6%	9.2%
January	91.3%	90.0%	91.3%	85.8%	80.3%	80.8%	82.7%
February		98.2%	100.7%	92.1%	90.7%	85.6%	91.0%
March		100.2%	103.2%	94.0%	92.4%	87.6%	93.3%
April		108.6%	110.9%	101.8%	101.7%	93.3%	100.7%
May		112.7%	114.2%	104.9%	105.2%	97.9%	104.4%
June		113.7%	115.0%	105.3%	105.7%	99.1%	105.2%

As of January 31, 2025 GEMS has received 91.3% of tax revenue budgeted.
In other words, $351,682.24 has been received of the $385,000.00 tax revenue budgeted.

GLENPOOL FIRE DEPARTMENT

MED BAG CHECKLIST

Unit: Engine 1

Date: 21 February 2025

FRONT ZIPPER POCKET

- [x] 1 B/P Cuff
- [x] 1 Stethoscope
- [x] 1 Pulse Oximeter
- [x] 1 - Ped. Cannula
- [x] 1 - Infant Cannula
- [x] 2 - Infant NRB
- [x] 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET

[x]	1 - Airtraq Camera	Blue	Exp. Date:	30 November 2022
[x]	1 -Thomas Tube Holder	Pink	Exp. Date:	01 April 2023
[x]	1 - Airtraq Blade	Grey	Exp. Date:	31 December 2022

O2 LEFT SIDE POCKET

- [x] 1-O2 Cylinder — psi: 2000
- [x] 2-Adult NRB
- [x] 2-Adult NC
- [x] 1-Adult BVM

INSIDE POCKET

[x]	1-Blood Glucose Kit/Test Strips	Exp. Date:	13 April 2024
[x]	1-Tube Glucose 31g	Exp. Date:	28 February 2025

- [x] Lancettes
- [x] Adhesive Bandages
- [x] Alcohol Swabs
- [x] 1-Tactical Tourniquet
- [x] 1-Thermometer
- [x] 1-Samsplint

FIRST AID BAG

- [x] Medical Tape
- [x] Flush
- [x] Conban
- [x] Bandaids
- [x] Tri-Angle Bandage
- [x] 4X4s
- [x] Bandage Roll
- [x] 3X3s

INSIDE CLEAR LID

- [x] Sharps Shuttle
- [x] Pen Light
- [x] Hand Sanitizer
- [x] Trauma Sheers
- [x] Ring Cutter
- [ ] Convenience Bags
- [x] Bio Bag

IV COMPARTMENT

- [x] Sharps Shuttle
- [x] IV 10 Drop Administration Sets
- [x] 1-Roll Medical Tape
- [x] 1-Arrow IO Drill

2-14g IV	Exp. Date:	27 July 2025	Exp. Date:	27 July 2025
2-18g IV	Exp. Date:	20 October 2026	Exp. Date:	20 October 2026
2-20g IV	Exp. Date:	25 March 2025	Exp. Date:	02 May 2027
2-22g IV	Exp. Date:	23 February 2025	Exp. Date:	25 February 2025
2-24g IV	Exp. Date:	10 July 2025	Exp. Date:	10 July 2025
4-Saline Flushes	Exp. Date:	01 April 2026	Exp. Date:	01 April 2026
	Exp. Date:	01 April 2026	Exp. Date:	01 April 2026

- [x] 2-IV Start Kits

2-EZ Stabilizers	Exp. Date:	15 September 2025	Exp. Date:	16 December 2024
2-45mm 15g IO Needle Set	Exp. Date:	31 May 2026	Exp. Date:	30 June 2026
2-25mm 15g IO Needle Set	Exp. Date:	31 March 2027	Exp. Date:	30 June 2025
1-IV Bag	Exp. Date:	01 January 2026		

- [x] 1 Pressure Bag

AIRWAY COMPARTMENT

1-2.5 ET Tube	Exp. Date:	28 February 2025	1-7.0 ET Tube	Exp. Date: 14 January 2027
1-3.0 ET Tube	Exp. Date:	31 December 2025	1-7.5 ET Tube	Exp. Date: 17 October 2024
1-3.5 ET Tube	Exp. Date:	06 May 2026	1-8.0 ET Tube	Exp. Date: 19 December 2024
1-4.0 ET Tube	Exp. Date:	14 April 2027	1-8.5 ET Tube	Exp. Date: 31 December 2024
1-4.5 ET Tube	Exp. Date:	24 May 2027	1-9.0 ET Tube	Exp. Date: 14 August 2026
1-5.0 ET Tube	Exp. Date:	02 February 2025	1-OPA Kit	[x]
1-5.5 ET Tube	Exp. Date:	24 July 2026	K-Y Lube Gel	Exp. Date: 29 July 2028
1-6.0 ET Tube	Exp. Date:	14 August 2026		
1-6.5 ET Tube	Exp. Date:	01 December 2024		

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	10 November 2027
Size 9.3	Exp. Date:	22 December 2026
Size 10	Exp. Date:	09 December 2026
Size 10.7	Exp. Date:	30 April 2027
Size 11.3	Exp. Date:	10 February 2026

4 KAD

Green	Exp. Date:	12 October 2026
Purple	Exp. Date:	
Yellow	Exp. Date:	30 November 2027
Red	Exp. Date:	01 August 2025

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	01 May 2025		
1-50% Dextrose	Exp. Date:	30 January 2025		
2 - Epinephrine Injection 1mg/mL	Exp. Date:	31 December 2024	Exp. Date:	31 December 2024
2 - 18g Filter Needles	Exp. Date:	01 May 2025	Exp. Date:	15 December 2024
2 - 23g Eclipse Needle	Exp. Date:	31 March 2025	Exp. Date:	31 March 2025
2 - 1mL Syringe	Exp. Date:	31 December 2026	Exp. Date:	31 December 2026
2 - 4x4 Gauze	☑			
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	30 April 2025	Exp. Date:	30 April 2025
1 - 2% Lidocane Hcl	Exp. Date:	30 April 2024		
1 - Nebulizer Kit	☑			
3 - Albuterol 2.5mg	Exp:	30 March 2025	Exp:	30 March 2025
	Exp:	30 March 2025		
1 - Levalbuterol 1.25	Exp. Date:	29 February 2024		
1 - Levalbuterol 0.31	Exp. Date:	29 February 2024		
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	31 August 2025	Exp. Date:	31 August 2025
1 - Low Dose Aspirin (81 mg)	Exp. Date:	31 March 2026		
1 - Roll Med Tape	☑			

LIFEPAK MONITOR

Child/ Adult AED Pads	Exp. Date:	30 April 2025
Capno	☑	
PEDI Pulse OX	Exp. Date:	30 November 2025

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist
This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: 45886287 Location: E-1 DATE 21 February 2025

1. Inspect physical condition for:

Foreign substances	☑ Pass	☐ Fail
Damage or cracks	☑ Pass	☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins.	☑ Pass	☐ Fail
Damaged or leaking battery.	☑ Pass	☐ Fail
Spare battery available	☑ Pass	☐ Fail
Damage to power adapters or cable.	☑ Pass	☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins	☑ Pass	☐ Fail

4. Check ECG electrodes and therapy electrodes for:

Use by date	☑ Pass	☐ Fail
Spare electrodes available	☑ Pass	☐ Fail
Damaged, open package	☑ Pass	☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

Momentary illumination of self test messages and LED's and speaker beep.	☑ Pass	☐ Fail
Two fully charged batteries	☑ Pass	☐ Fail
Service indicator	☑ Pass	☐ Fail

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

Power adapter LED stripes illuminated	☑ Pass	☐ Fail
Auxiliary power LED on device is illuminated	☑ Pass	☐ Fail
Battery charging LED on device is illuminating or flashing.	☑ Pass	☐ Fail

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

Disconnect and examine cable for cracking, damaged, broken or bent parts and pins.	☑ Pass	☐ Fail
Connect therapy cable to defibrillator and test load.	☑ Pass	☐ Fail
Select LEAD then PADDLES	☑ Pass	☐ Fail
Select 200 JOULES and press CHARGE.	☑ Pass	☐ Fail
Press SHOCK button	☑ Pass	☐ Fail
Confirm ENERGY DELIVERED message appears.	☑ Pass	☐ Fail
Remove test load from cable and verify PADDLES LEAD OFF appears.	☑ Pass	☐ Fail

8. Energy

Press only one (shock) button and release. Confirm that energy was not discharged.	☑ Pass	☐ Fail
Press the other (shock) button. Confirm that energy was not discharged.	☑ Pass	☐ Fail
Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears.	☑ Pass	☐ Fail

8. Cont.

Remove paddles from wells, and confirm artifact on screen.		☑ Pass	☐ Fail
Place paddle surfaces together, and confirm flat line on screen.		☑ Pass	☐ Fail
Return paddles securely to paddle wells.		☑ Pass	☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu. ☑ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.		☑ Pass	☐ Fail
Ability to print.		☑ Pass	☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.	☑ N/A	☐ Pass	☐ Fail
Send a test transmission.	☑ N/A	☐ Pass	☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely. ☑ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor	☑ Pass	☐ Fail

Laerdal Scope

Clean suction unit.	☑ Pass	☐ Fail
Check for occlusions.	☑ Pass	☐ Fail
Check vacuum build-up efficiency within 3 seconds.	☑ Pass	☐ Fail
Check maximum achievable vacuum within 10 seconds.	☑ Pass	☐ Fail
Check for air leaks.	☑ Pass	☐ Fail

AirTraq Videoscope

Clean videoscope	☑ Pass	☐ Fail
Verify that the battery % is above 50%.	☑ Pass	☐ Fail

2% Bag

Top Left Pocket (IV Fluids)

	Seal:	851	New Seal:	315
2 IV bags	Exp.:	31 August 2025	Exp.:	31 December 2025
2 IV/IO drop admin sets	☑			

Center Pocket

	Seal:	888	New Seal:	872
2-Asherman chest seals	Exp.:	31 January 2025	Exp.:	31 January 2025
2- 4X4 Gauze	☑			
1-Roll white duct tape	☑			
1-Tactical Tourniquet	☑			
3- 5X9 Gauze	☑			
2-Rolls Coban	☑			
2- Ice packs	☑			
2- Stretch Gauze	☑			

Center Pocket Cont.

2- Bandage roll	☑
1- Sterile burn sheet 60X90.	☑
1- Head block	☑
1- Blood stopper	☑
1- Multi-trauma dressing 12X30	☑
1-RAD 57 Pulse Ox	☑

Bottom Right Pocket — Seal: 815 — New Seal: 852

1- SAM splint	☑
1- Triangular bandage	☑
1- Roll coban	☑

Bottom Left Pocket — Seal: 820 — New Seal: 826

1- SAM splint	☑
1- Triangular bandage	☑
1- Roll coban	☑

Bop Right Pocket: (Ped/Infant) — Seal: 814 — New Seal: 832

1- Ped/Infant NRB	☑
1- Ped NRB mask	☑
2- Infant NRB mask	☑

GDF STAFF TH

GLENPOOL FIRE DEPARTMENT

MED BAG CHECKLIST

Unit: R1

Date: 21 February 2025

FRONT ZIPPER POCKET

- [x] 1 B/P Cuff
- [x] 1 Stethoscope
- [x] 1 Pulse Oximeter
- [x] 1 - Ped. Cannula
- [x] 1 - Infant Cannula
- [x] 2 - Infant NRB
- [x] 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET

[x]	1 - Airtraq Camera	Blue	Exp. Date:	31 January 2022
[x]	1 -Thomas Tube Holder	Pink	Exp. Date:	30 April 2023
[x]	1 - Airtraq Blade	Grey	Exp. Date:	29 January 2023

O2 LEFT SIDE POCKET

- [x] 1-O2 Cylinder psi 1400
- [x] 2-Adult NRB
- [x] 2-Adult NC
- [x] 1-Adult BVM

INSIDE POCKET

- [x] 1-Blood Glucose Kit/Test Strips Exp. Date: 10 October 2025
- [x] 1-Tube Glucose 31g Exp. Date: 26 December 2026
- [x] Lancettes
- [x] Adhesive Bandages
- [x] Alcohol Swabs
- [x] 1-Tactical Tourniquet
- [x] 1-Thermometer
- [x] 1-Samsplint

FIRST AID BAG

- [x] Medical Tape
- [x] Flush
- [x] Conban
- [x] Bandaids
- [x] Tri-Angle Bandage
- [x] 4X4s
- [x] Bandage Roll
- [ ] 3X3s

INSIDE CLEAR LID

- [x] Sharps Shuttle
- [x] Pen Light
- [x] Hand Sanitizer
- [x] Trauma Sheers
- [x] Ring Cutter
- [x] Convenience Bags
- [x] Bio Bag

IV COMPARTMENT

- [x] Sharps Shuttle
- [x] IV 10 Drop Administration Sets
- [x] 1-Roll Medical Tape
- [x] 1-Arrow IO Drill

2-14g IV	Exp. Date:	31 July 2025	Exp. Date:	31 July 2025
2-18g IV	Exp. Date:	27 September 2024	Exp. Date:	10 May 2026
2-20g IV	Exp. Date:	03 May 2027	Exp. Date:	12 May 2027
2-22g IV	Exp. Date:	13 November 2025	Exp. Date:	20 June 2025
2-24g IV	Exp. Date:	27 July 2025	Exp. Date:	27 July 2025
4-Saline Flushes	Exp. Date:	30 January 2026	Exp. Date:	31 January 2026
	Exp. Date:	31 January 2026	Exp. Date:	31 January 2026

- [x] 2-IV Start Kits

2-EZ Stabilizers	Exp. Date:	16 December 2024	Exp. Date:	21 September 2026
2-45mm 15g IO Needle Set	Exp. Date:	30 June 2025	Exp. Date:	30 June 2026
2-25mm 15g IO Needle Set	Exp. Date:	29 February 2024	Exp. Date:	30 May 2026
1-IV Bag	Exp. Date:	25 January 2026		

- [x] 1 Pressure Bag

AIRWAY COMPARTMENT

1-2.5 ET Tube	Exp. Date:	19 February 2025	1-7.0 ET Tube	Exp. Date: 19 February 2026
1-3.0 ET Tube	Exp. Date:	31 December 2024	1-7.5 ET Tube	Exp. Date: 19 December 2024
1-3.5 ET Tube	Exp. Date:	18 July 2024	1-8.0 ET Tube	Exp. Date: 30 December 2025
1-4.0 ET Tube	Exp. Date:	19 April 2027	1-8.5 ET Tube	Exp. Date: 22 December 2024
1-4.5 ET Tube	Exp. Date:	17 July 2027	1-9.0 ET Tube	Exp. Date: 29 October 2024
1-5.0 ET Tube	Exp. Date:	08 February 2025	1-OPA Kit	[x]
1-5.5 ET Tube	Exp. Date:	13 October 2024	K-Y Lube Gel	Exp. Date: 29 July 2027
1-6.0 ET Tube	Exp. Date:	30 October 2024		
1-6.5 ET Tube	Exp. Date:	29 December 2025		

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	30 April 2024
Size 9.3	Exp. Date:	30 November 2024
Size 10	Exp. Date:	30 April 2024
Size 10.7	Exp. Date:	25 July 2026
Size 11.3	Exp. Date:	28 February 2026

4 KAD

Green	Exp. Date:	01 July 2024
Purple	Exp. Date:	06 October 2023
Yellow	Exp. Date:	01 July 2026
Red	Exp. Date:	01 October 2027

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	28 March 2024		
1-50% Dextrose	Exp. Date:	31 January 2025		
2 - Epinephrine Injection 1mg/mL	Exp. Date:	30 September 2025	Exp. Date:	30 September 2025
2 - 18g Filter Needles	Exp. Date:	31 May 2025	Exp. Date:	31 May 2025
2 - 23g Eclipse Needle	Exp. Date:	31 March 2025	Exp. Date:	31 March 2025
2 - 1mL Syringe	Exp. Date:	28 December 2026	Exp. Date:	28 December 2026
2 - 4x4 Gauze	☑			
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	04 April 2025	Exp. Date:	30 April 2025
1 - 2% Lidocane Hcl	Exp. Date:	28 February 2026		
1 - Nebulizer Kit	☑			
3 - Albuterol 2.5mg	Exp:	30 March 2025	Exp: 28 March 2025	Exp: 30 March 2025
1 - Levalbuterol 1.25mg	Exp. Date:	28 November 2025		
1 - Levalbuterol 0.31mg	Exp. Date:	28 August 2024		
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	28 August 2025	Exp. Date:	28 August 2025
1 - Low Dose Aspirin (81 mg)	Exp. Date:	25 December 2025		
1 - Roll Med Tape	☑			

LIFEPAK MONITOR

Pedi AED Pads	Exp. Date:	07 November 2025
Child/ Adult AED Pads	Exp. Date:	04 March 2025
Capno	☑	
PEDI Pulse OX	Exp. Date:	01 August 2025

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist
This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: 45886339 Location: Rescue-1 DATE 21 February 2025

1. Inspect physical condition for:

Foreign substances	☑ Pass	☐ Fail
Damage or cracks	☑ Pass	☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins.	☑ Pass	☐ Fail
Damaged or leaking battery.	☑ Pass	☐ Fail
Spare battery available	☑ Pass	☐ Fail
Damage to power adapters or cable.	☑ Pass	☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins	☑ Pass	☐ Fail

4. Check ECG electrodes and therapy electrodes for:

Use by date	☑ Pass	☐ Fail
Spare electrodes available	☑ Pass	☐ Fail
Damaged, open package	☑ Pass	☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

Momentary illumination of self test messages and LED's and speaker beep.	☑ Pass	☐ Fail
Two fully charged batteries	☑ Pass	☐ Fail
Service indicator	☑ Pass	☐ Fail

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

Power adapter LED stripes illuminated	☑ Pass	☐ Fail
Auxiliary power LED on device is illuminated	☑ Pass	☐ Fail
Battery charging LED on device is illuminating or flashing.	☑ Pass	☐ Fail

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

Disconnect and examine cable for cracking, damaged, broken or bent parts and pins.	☑ Pass	☐ Fail
Connect therapy cable to defibrillator and test load.	☑ Pass	☐ Fail
Select LEAD then PADDLES	☑ Pass	☐ Fail
Select 200 JOULES and press CHARGE.	☑ Pass	☐ Fail
Press SHOCK button	☑ Pass	☐ Fail
Confirm ENERGY DELIVERED message appears.	☑ Pass	☐ Fail
Remove test load from cable and verify PADDLES LEAD OFF appears.	☑ Pass	☐ Fail

8. Energy

Press only one (shock) button and release. Confirm that energy was not discharged.	☑ Pass	☐ Fail
Press the other (shock) button. Confirm that energy was not discharged.	☑ Pass	☐ Fail
Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears.	☑ Pass	☐ Fail

8. Cont.

Remove paddles from wells, and confirm artifact on screen.		☑ Pass	☐ Fail
Place paddle surfaces together, and confirm flat line on screen.		☑ Pass	☐ Fail
Return paddles securely to paddle wells.		☑ Pass	☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.			
Select USER TEST in menu.		☑ Pass	☐ Fail
Confirm test results printed.			

10. Check ECG printer for:

Adequate paper supply.		☑ Pass	☐ Fail
Ability to print.		☑ Pass	☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.	☑ N/A	☐ Pass	☐ Fail
Send a test transmission.	☑ N/A	☐ Pass	☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely. ☑ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor	☑ Pass	☐ Fail

Laerdal Scope

Clean suction unit.	☑ Pass	☐ Fail
Check for occlusions.	☑ Pass	☐ Fail
Check vacuum build-up efficiency within 3 seconds.	☑ Pass	☐ Fail
Check maximum achievable vacuum within 10 seconds.	☑ Pass	☐ Fail
Check for air leaks.	☑ Pass	☐ Fail

AirTraq Videoscope

Clean videoscope	☑ Pass	☐ Fail
Verify that the battery % is above 50%.	☑ Pass	☐ Fail

2% Bag

Top Left Pocket (IV Fluids)

	Seal:	885	New Seal:	826
2 IV bags	Exp.:	28 August 2025	Exp.:	31 August 2024
2 IV/IO drop admin sets	☑			

Center Pocket

	Seal:	822	New Seal:	839
2-Asherman chest seals	Exp.:	31 January 2025	Exp.:	31 January 2025
2- 4X4 Gauze	☑			
1-Roll white duct tape	☑			
1-Tactical Tourniquet	☑			
3- 5X9 Gauze	☑			
2-Rolls Coban	☑			
2- Ice packs	☑			
2- Stretch Gauze	☑			

Center Pocket Cont.

2- Bandage roll	☑
1- Sterile burn sheet 60X90.	☑
1- Head block	☑
1- Blood stopper	☑
1- Multi-trauma dressing 12X30	☑
1-RAD 57 Pulse Ox	☑

Bottom Right Pocket — Seal: 818 — New Seal: 894

1- SAM splint	☑
1- Triangular bandage	☑
1- Roll coban	☑

Bottom Left Pocket — Seal: 812 — New Seal: 321

1- SAM splint	☑
1- Triangular bandage	☑
1- Roll coban	☑

Bop Right Pocket: (Ped/Infant) — Seal: 816 — New Seal: 834

1- Ped/Infant NRB	☑
1- Ped NRB mask	☑
2- Infant NRB mask	☑

GDF STAFF

MINUTES
GEMS Meeting
Monday, February 3, 2025 Council Chambers 6:00 PM

TRUSTEES PRESENT: Tim Fox
Jacqueline Triplett-Lund
Joyce Calvert
Chris Brobst
Shayne Buchanan

TRUSTEES ABSENT:

STAFF PRESENT: Lea Ann Reed
Lesli Smith
Joe Wuest
Joshua Brannon

STAFF ABSENT:

A) Call to Order - Joyce G. Calvert, Chair
Chair Calvert called the meeting to order at 7:13 p.m.

B) Roll Call, Declaration of Quorum – Lesli Smith, Clerk; Joyce G. Calvert, Chair
Lesli Smith called the roll; Chair Calvert declared a quorum present. Jana Burk Attorney, of Rosenstein, Fist & Ringold, were also in attendance.

C) EMS Report - Brian Cook, Director of Operations, Mercy Regional EMS
Mr. Cook gave a report for the dates of January 1, 2025, through January 28, 2025.

D) District Administrator Report
No official District Administrator Report given.

E) Trustee Comments
There were no trustee comments.

F) Public Comments
There were no public comments.

G) Consideration and appropriate action relating to a request for approval of the

Consent Agenda. (All matters listed under "Consent" are considered by the GEMS Board to be routine and will be enacted by one motion. Any Trustee may, however, remove an item from the Consent Agenda by request. A motion to adopt the consent Agenda is non-debatable.)

1) Approval of the Minutes from the January 6, 2025, meeting.

2) Approval of purchase orders receiving report and payment claims as of January 20, 2024, totaling $ 32,988.11.

Moved by Jacqueline Triplett-Lund, seconded by Chris Brobst

To approve the consent agenda.

	For	Against	Abstained	Absent
Tim Fox	x			
Jacqueline Triplett-Lund	x			
Joyce Calvert	x			
Chris Brobst	x			
Shayne Buchanan	x			
	5	0	0	0

CARRIED.

H) Consideration and appropriate action relating to items removed from the Consent Agenda

No items removed from the consent agenda.

I) Scheduled Business

No items in scheduled business.

J) Adjournment

The meeting was adjourned at 7:16 p.m.

GEMS
Glenpool Area Medical Service District
Glenpool, Oklahoma

To: HONORABLE CHAIR AND GEMS DISTRICT BOARD MEMBERS

From: JOSHUA BRANNON, DISTRICT TREASURER

Date: March 3, 2025

Subject: Approval of Purchase Orders Receiving Report and Payment Claims as of 2/26/2025 totaling $31,983.80.

Staff Recommendation:
Staff recommends a motion to accept the PO Receipt Register report dated 1/29/2025 and approve the following payments:

P.O. #	ACCOUNT	VENDOR	DESCRIPTION	INV #	AMOUNT
25-20985	31-6-01-6210	Centurion Health Systems	Ambulance Service FEB 25	3310	$15,000.00
25-20986	31-6-01-6225	City of Glenpool	1st Responder JAN 2025	FEB2025	$16,567.14
25-20987	31-6-01-6235	Lesli Smith	District Clerk	LS32025	$208.33
25-20988	31-6-01-6235	Joshua Brannon	District Treasurer	JB32025	$208.33
				Total	$31,983.80

Attachments:
1. Purchase Order Claim Register dated 2/26/2025 totaling $31,983.80
2. PO Receipt Register dated 2/26/2025 totaling $31,983.80
3. Purchase Orders and Invoices totaling $31,983.80

12205 S. Yukon, Glenpool, OK 74033 • OFFICE: 918-209-4630 FAX: 918-209-4626

VENDOR NAME / INVOICE	POST DATE	BANK	INVOICE AMOUNT	VENDOR TOTAL
31-000004 CENTURION HEALTH SYSTEMS,DBA M				15,000.00
3310	3/03/2025	31	15,000.00	
31-000005 CITY OF GLENPOOL - GEMS				16,567.14
FEB2025	3/03/2025	31	16,567.14	
31-000033 JOSHUA M. BRANNON				208.33
JB32025	3/03/2025	31	208.33	
31-000032 LESLI SMITH				208.33
LS32025	3/03/2025	31	208.33	
		TOTALS	31,983.80	31,983.80

APPROVED

BY

Joyce G. Calvert, Mar. 3, 2025

FUND: 31 - GEMS SUMMARY REPORT

PURCHASE ORDER	DESCRIPTION	VENDOR #	VENDOR NAME	DATE INVOICE	AMOUNT
DEPARTMENT: 01 - NON-DEPARTMENTAL					
25-20985	GEMS MERCY INVOICE MARCH	31-000004	CENTURION HEALTH SYSTEMS,DBA	3/2025 3310	15,000.00
25-20986	1ST RESPONDER FEB 2025	31-000005	CITY OF GLENPOOL - GEMS	3/2025 FEB2025	16,567.14
25-20987	GEMS L. SMITH FEB 2025 IN	31-000032	LESLI SMITH	3/2025 LS32025	208.33
25-20988	GEMS J BRANNON FEB 25 INV	31-000033	JOSHUA M. BRANNON	3/2025 JB32025	208.33
				DEPARTMENT TOTAL:	31,983.80
				FUND TOTAL:	31,983.80
				GRAND TOTAL:	31,983.80

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected

PURCHASE ORDER # 25-20985 02/26/2025

ISSUED TO: VEND #: 31-000004

CENTURION HEALTH SYSTEMS, D
MERCY REGIONAL OKLAHOMA
9106 N GARNET RD
OWASSO, OK 74055

SHIP TO:

GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

02/26/2025

PURCHASING OFFICER DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF SAID APPROPRIATION. 02/26/2025

ENCUMBERING OFFICER DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS MERCY INVOICE MARCH 25 INVOICE 3310 GEMS MERCY INVOICE MARCH 25 GEMS MERCY INVOICE MARCH 25		00038295	31 -6-01-6210		0.00	15,000.00 *

** TOTAL ** 15,000.00

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE DATE

62 O.S. SECTION 310.9 AND 74 O.S. SECTION 3109, PROVIDES THAT THE VEDOR'S SUBMISSION OF AN INVOICE OR ACCEPTANCE OF PAYMENT PURSUANT TO THIS PURCHASE CONSTITUTES A STATEMENT BY THE VENDOR THAT THE INVOICE OR CLAIM IS TRUE AND CORRECT. THE WORK, SERVICES OR MATERIALS AS SHOWN BY THE INVOICE OR CLAIM HAVE BEEN COMPLETED OR SUPPLIED IN ACCORDANCE WITH THE PLANS, SPECIFICATIONS, ORDERS OR REQUESTS FURNISHED THE VENDOR, AND THE VENDOR HAS MADE NO PAYMENT, DIRECTLY OR INDIRECTLY, TO ANY ELECTED OFFICIAL, OFFICER OR EMPLOYEE OF THIS STATE OR ANY COUNTY OR POLTICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT. ANY VENDOR WHO SUBMITS AND INVOICE OR ACCEPTS PAYMENT PURSUANT TO THIS PURCHASE ORDER SHALL BE DEEMED TO ADOPT AND AFFIRM THE STATEMENT CONTAINED IN THIS PURCHASE ORDER UNLESS THE VENDOR STATES ON THE INVOICE THAT THE STATEMENT IS INCORRECT IN WHOLE OR IN PART; AND THE CITY OF GLENPOOL OR ITS RELATED ENTITIES AS THEIR INTEREST MAY APPEAR, MAY RECOVER FROM THE VENDOR THE FULL AMOUNT PAID PURSUANT TO THE PURCHASE ORDER IF THE STATEMENT ADOPTED AND AFFIRMED BY THE VENDOR IS FALSE.

THE VENDOR SHALL FURNISH ITEMIZED INVOICE WHICH STATES THE VENDOR'S NAME AND ADDRESS. A CLEAR DESCRIPTION OF EACH ITEM PURCHASED IT'S PRICE, THE NUMBER OR VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Req# 00038295

Mercy Regional Oklahoma

P.O. Box 2398
Owasso, OK 74055

Invoice

Date	Invoice #
2/10/2025	3310

Bill To
Glenpool City Accounts Payable 12205 S Yukon Ave Glenpool, Ok 74033

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
1	ALS Ambulance Subsidy for March 2025	15,000.00	15,000.00
		Total	$15,000.00

Phone #	Fax #
9186095829	918-609-5799

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected

PURCHASE ORDER # 25-20986 02/26/2025

ISSUED TO: VEND #: 31-000005

CITY OF GLENPOOL - GEMS
12205 S YUKON AVE.
GLENPOOL, OK 74033

SHIP TO:

GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

02/26/2025

PURCHASING OFFICER DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF SAID APPROPRIATION. 02/26/2025

ENCUMBERING OFFICER DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	1ST RESPONDER FEB 2025 1ST RESPONDER FEB 2025		00038347	31 -6-01-6225		0.00	16,567.14 *

** TOTAL ** 16,567.14

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE DATE

62 O.S. SECTION 310.9 AND 74 O.S. SECTION 3109, PROVIDES THAT THE VEDOR'S SUBMISSION OF AN INVOICE OR ACCEPTANCE OF PAYMENT PURSUANT TO THIS PURCHASE CONSTITUTES A STATEMENT BY THE VENDOR THAT THE INVOICE OR CLAIM IS TRUE AND CORRECT. THE WORK, SERVICES OR MATERIALS AS SHOWN BY THE INVOICE OR CLAIM HAVE BEEN COMPLETED OR SUPPLIED IN ACCORDANCE WITH THE PLANS, SPECIFICATIONS, ORDERS OR REQUESTS FURNISHED THE VENDOR, AND THE VENDOR HAS MADE NO PAYMENT, DIRECTLY OR INDIRECTLY, TO ANY ELECTED OFFICIAL, OFFICER OR EMPLOYEE OF THIS STATE OR ANY COUNTY OR POLTICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT. ANY VENDOR WHO SUBMITS AND INVOICE OR ACCEPTS PAYMENT PURSUANT TO THIS PURCHASE ORDER SHALL BE DEEMED TO ADOPT AND AFFIRM THE STATEMENT CONTAINED IN THIS PURCHASE ORDER UNLESS THE VENDOR STATES ON THE INVOICE THAT THE STATEMENT IS INCORRECT IN WHOLE OR IN PART; AND THE CITY OF GLENPOOL OR ITS RELATED ENTITIES AS THEIR INTEREST MAY APPEAR, MAY RECOVER FROM THE VENDOR THE FULL AMOUNT PAID PURSUANT TO THE PURCHASE ORDER IF THE STATEMENT ADOPTED AND AFFIRMED BY THE VENDOR IS FALSE.

THE VENDOR SHALL FURNISH ITEMIZED INVOICE WHICH STATES THE VENDOR'S NAME AND ADDRESS. A CLEAR DESCRIPTION OF EACH ITEM PURCHASED IT'S PRICE, THE NUMBER OR VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

City Of Glenpool
Creating Opportunity

INVOICE

CITY OF GLENPOOL
12205 S. YUKON AVE..
GLENPOOL, OK 74033
PHONE (918)322-5409

Customer Number: 01-0172
Invoice Number: FEB2025
Invoice Date: 2/26/2025
Due Date: 3/28/2025
P.O. # :

TREASURER
GEMS-
12205 S YUKON AVE
GLENPOOL OK 74033

ITEM DESCRIPTION	UNITS	TYPE	PRICE	AMOUNT
1ST RESP REIMBURSMENT FEB 25	N/A	MONTH	N/A	16,567.14

FEBRUARY 2025

*********THANK YOU**********

TOTAL DUE $16,567.14

GEMS ADMIN/FIRST RESPONDER REIMBURSEMENTS

FY 24/25 JAN 2025 1/21/2025-2/20/2025

TOTAL RUNS	213
EMR RUNS	146
FIRE RUNS	67
EMR RATIO	68.54%
RUN RATE	$111.59
ADMIN	$275.00
OVERTIME	$0.00
TOTAL	$16,567.14

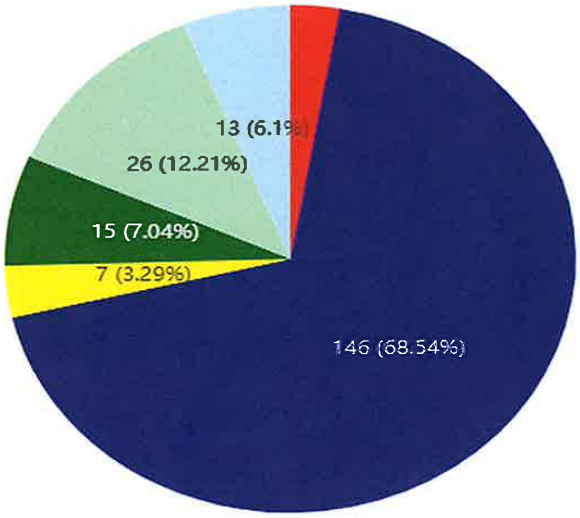
Req# 000 38347

Glenpool Fire Department Operations February 2025

GEMS 1/21/25-2/20/25

Run Type	# of Calls	Totals Calls
EMS Runs	146	213
Fire Runs	67	
Overlapping	68	

Total (213)



Incident Type Series

6	1 - Fire
146	3 - Rescue & Emergency Medical Service Incident
7	4 - Hazardous Condition (No Fire)
15	5 - Service Call
26	6 - Good Intent Call
13	7 - False Alarm & False Call
213	

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected

PURCHASE ORDER # 25-20987 02/26/2025

ISSUED TO: VEND #: 31-000032

LESLI SMITH
14714 COURTNEY LANE
GLENPOOL, OK 74033

SHIP TO:
GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

02/26/2025

PURCHASING OFFICER DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF SAID APPROPRIATION. 02/26/2025

ENCUMBERING OFFICER DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMSL. SMITH FEB 25 INVOICE GEMS L. SMITH FEB 2025 INVOICE		00038349	31 -6-01-6235		0.00	208.33 *

** TOTAL ** 208.33

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE DATE

62 O.S. SECTION 310.9 AND 74 O.S. SECTION 3109, PROVIDES THAT THE VEDOR'S SUBMISSION OF AN INVOICE OR ACCEPTANCE OF PAYMENT PURSUANT TO THIS PURCHASE CONSTITUTES A STATEMENT BY THE VENDOR THAT THE INVOICE OR CLAIM IS TRUE AND CORRECT. THE WORK, SERVICES OR MATERIALS AS SHOWN BY THE INVOICE OR CLAIM HAVE BEEN COMPLETED OR SUPPLIED IN ACCORDANCE WITH THE PLANS, SPECIFICATIONS, ORDERS OR REQUESTS FURNISHED THE VENDOR, AND THE VENDOR HAS MADE NO PAYMENT, DIRECTLY OR INDIRECTLY, TO ANY ELECTED OFFICIAL, OFFICER OR EMPLOYEE OF THIS STATE OR ANY COUNTY OR POLTICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT. ANY VENDOR WHO SUBMITS AND INVOICE OR ACCEPTS PAYMENT PURSUANT TO THIS PURCHASE ORDER SHALL BE DEEMED TO ADOPT AND AFFIRM THE STATEMENT CONTAINED IN THIS PURCHASE ORDER UNLESS THE VENDOR STATES ON THE INVOICE THAT THE STATEMENT IS INCORRECT IN WHOLE OR IN PART; AND THE CITY OF GLENPOOL OR ITS RELATED ENTITIES AS THEIR INTEREST MAY APPEAR, MAY RECOVER FROM THE VENDOR THE FULL AMOUNT PAID PURSUANT TO THE PURCHASE ORDER IF THE STATEMENT ADOPTED AND AFFIRMED BY THE VENDOR IS FALSE.

THE VENDOR SHALL FURNISH ITEMIZED INVOICE WHICH STATES THE VENDOR'S NAME AND ADDRESS. A CLEAR DESCRIPTION OF EACH ITEM PURCHASED IT'S PRICE, THE NUMBER OR VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Reg#000 3 8349

INVOICE

Lesli Smith
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-322-3403
Email:

INVOICE #: LS32025
DATE: 3/1/2025

BILL TO:
Glenpool Emergency Medical Service
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone:918-209-4633 | Email: AP@cityofglenpool.com

Description	Amount
Contract Fees & Services	
FEBRUARY 2025	$208.33
Total	**$208.33**

If you have any questions concerning this invoice, Darrell Colbert / 918-209-4633 / Email: dcolbert@cityofglenpool.com

P U R C H A S E O R D E R

CITY OF GLENPOOL,OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected

PURCHASE ORDER # 25-20988 02/26/2025

ISSUED TO: VEND #: 31-000033

JOSHUA M. BRANNON
12205 S YUKON AVE.
GLENPOOL, OK 74033

SHIP TO:

GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

02/26/2025

PURCHASING OFFICER DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF SAID APPROPRIATION. 02/26/2025

ENCUMBERING OFFICER DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS J BRANNON FEB 25 INVOICE GEMS J BRANNON FEB 25 INVOICE		00038348	31 -6-01-6235		0.00	208.33 *

** TOTAL ** 208.33

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE DATE

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THE VENDOR SHALL FURNISH ITEMIZED INVOICE WHICH STATES THE VENDOR'S NAME AND ADDRESS. A CLEAR DESCRIPTION OF EACH ITEM PURCHASED IT'S PRICE, THE NUMBER OR VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Req#000 38348

INVOICE

Joshua Brannon
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-322-3403
Email:

INVOICE #: JB32025
DATE: 3/1/2025

BILL TO:
Glenpool Emergency Medical Service
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone:918-209-4633 | Email: AP@cityofglenpool.com

Description	Amount
Contract Fees & Services	
FEBRUARY 2025	$208.33
Total	$208.33

If you have any questions concerning this invoice, Darrell Colbert / 918-209-4633 / Email: dcolbert@cityofglenpool.com