

**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. immediately following the Glenpool Industrial Authority meeting on December 2, 2024, 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=QzdFVjA1b0lKa1lSUFIKbUNrUUxtdz09>

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/j/89753555435?pwd=QzdFVjA1b0lKa1lSUFIKbUNrUUxtdz09>

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 DECEMBER 2, 2024.**

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	3 - 6
D) District Administrator Report -	
1) GEMS FINANCIALS OCT 2024	7 - 31

[BAG CHECK \(Engine 1 2024-11-20\)](#)

[BAG CHECK \(R1 2024-11-20\)](#)

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 the November 4,2024 meeting. 32 - 33

[GEMS - 04 Nov 2024 - Minutes - Pdf](#)

2) Approval of purchase orders receiving report and payment claims as of November 25,2024, totaling \$33,610.84. 34 - 51

[GEMS Packet 12-02-24](#)

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

I) **Scheduled Business**

1) Discussion and possible action to approve or deny sending two firefighters to the EMT-A certification class for a total cost of \$2,800 to be paid from account number 31-6-01-6262. 52

(Paul Newton, Fire Chief)

[GEMS EMTA Nov 2024](#)

J) **Adjournment**

This notice and agenda was posted at Glenpool City Hall, 12205 S. Yukon Ave., Glenpool, Oklahoma, on November 27, 2024, at 5:30 pm.

Signed: Lesli Smith

Clerk

Mercy Regional



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: November 25, 2024

Ref: EMS Report October 31 – November 24, 2024

We logged 139 calls for service during this period while maintaining a 94% response time compliance.

79 patients treated and transported.
29 patients refused transport.
11 cancelled prior to arrival.
9 Mutual aid received.
7 mutual aid given.
2 No patient found.
2 DOA

We are sponsoring BlackGold Christmas along with a Christmas tree in the park. We will also participate in the Christmas parade.

Brian Cook,
Chief Operating Officer



Mercy Regional of Oklahoma is a member of the Centurion Health Systems family of companies.

CRun	Call Date	Pick Up Location	Destination	Dispatched	En Route	On Scene	Transport	Arrived	Clear	Response Time	Unit	
24-21190	10/31/2024 05:54	EMERGENCY SCENE	ST. FRANCIS TULSA	10/31/2024 05:54	10/31/2024 05:56	10/31/2024 06:03	10/31/2024 06:23	10/31/2024 06:42	10/31/2024 07:06	00:09:35	MEDIC 401	South of 181
24-21191	10/31/2024 05:56	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/31/2024 05:56	10/31/2024 05:57	10/31/2024 06:06	10/31/2024 06:44	10/31/2024 06:44	10/31/2024 06:44	00:10:10	MEDIC 402	South of 181
24-21212	10/31/2024 12:19	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/31/2024 12:19	10/31/2024 12:21	10/31/2024 12:27	10/31/2024 12:43	10/31/2024 12:43	10/31/2024 12:43	00:08:08	MEDIC 401	
24-21217	10/31/2024 13:39	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/31/2024 13:39	10/31/2024 13:41	10/31/2024 13:47	10/31/2024 14:01	10/31/2024 14:18	10/31/2024 14:32	00:08:05	MEDIC 401	
24-21229	10/31/2024 14:58	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/31/2024 14:58	10/31/2024 14:59	10/31/2024 15:08	10/31/2024 15:37	10/31/2024 15:52	10/31/2024 16:08	00:10:27	MUTUAL AID GIVEN	
24-21244	10/31/2024 19:31	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/31/2024 19:32	10/31/2024 19:33	10/31/2024 19:37	10/31/2024 19:52	10/31/2024 20:12	10/31/2024 20:28	00:05:23	MEDIC 401	
24-21247	10/31/2024 20:53	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/31/2024 20:53	10/31/2024 20:55	10/31/2024 20:59	10/31/2024 21:31	10/31/2024 21:39	10/31/2024 22:00	00:05:36	MEDIC 401	
24-21258	11/1/2024 03:15	EMERGENCY SCENE	ST. FRANCIS TULSA	11/1/2024 03:16	11/1/2024 03:19	11/1/2024 03:22	11/1/2024 03:34	11/1/2024 03:54	11/1/2024 04:10	00:06:46	MEDIC 401	
24-21271	11/1/2024 08:35	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/1/2024 08:36	11/1/2024 08:38	11/1/2024 08:39	11/1/2024 08:50	11/1/2024 09:09	11/1/2024 09:25	00:04:23	MEDIC 402	
24-21301	11/1/2024 15:24	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/1/2024 15:24	11/1/2024 15:28	11/1/2024 15:28	11/1/2024 15:46	11/1/2024 16:06	11/1/2024 16:33	00:04:23	MEDIC 401	
24-21302	11/1/2024 15:34	EMERGENCY SCENE	ST. JOHN TULSA	11/1/2024 15:35	11/1/2024 15:37	11/1/2024 15:40	11/1/2024 15:53	11/1/2024 16:23	11/1/2024 16:47	00:05:37	MEDIC 402	
24-21320	11/1/2024 19:09	EMERGENCY SCENE									MUTUAL AID RECIEVED	
24-21332	11/1/2024 23:41	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/1/2024 23:42	11/1/2024 23:44	11/1/2024 23:48	11/2/2024 00:18	11/2/2024 00:18	11/2/2024 00:18	00:06:28	MEDIC 401	
24-21347	11/2/2024 06:49	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/2/2024 06:50	11/2/2024 06:54	11/2/2024 06:59	11/2/2024 07:22	11/2/2024 07:37	11/2/2024 08:17	00:09:43	MUTUAL AID GIVEN	
24-21358	11/2/2024 12:20	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	11/2/2024 12:21	11/2/2024 12:23	11/2/2024 12:27	11/2/2024 12:48	11/2/2024 13:07	11/2/2024 13:25	00:07:31	MEDIC 401	
24-21370	11/2/2024 16:30	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	11/2/2024 16:31	11/2/2024 16:34	11/2/2024 16:46	11/2/2024 16:53	11/2/2024 16:58	11/2/2024 17:56	00:16:05	MEDIC 401	
24-21375	11/2/2024 18:35	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/2/2024 18:36	11/2/2024 18:39	11/2/2024 18:42	11/2/2024 18:42	11/2/2024 19:02	11/2/2024 19:39	00:06:50	MEDIC 401	
24-21385	11/2/2024 21:15	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	11/2/2024 21:16	11/2/2024 21:16	11/2/2024 21:24	11/2/2024 21:27	11/2/2024 21:27	11/2/2024 21:27	00:09:14	MEDIC 402	South of 181
24-21410	11/3/2024 10:19	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	11/3/2024 10:20	11/3/2024 10:22	11/3/2024 10:31	11/3/2024 10:57	11/3/2024 10:57	11/3/2024 10:57	00:11:44	MEDIC 401	STAGED
24-21441	11/3/2024 18:54	EMERGENCY SCENE	HILLCREST SOUTH	11/3/2024 18:54	11/3/2024 18:56	11/3/2024 19:00	11/3/2024 19:16	11/3/2024 19:40	11/3/2024 20:00	00:06:14	MEDIC 401	
24-21442	11/3/2024 19:24	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/3/2024 19:25	11/3/2024 19:26	11/3/2024 19:39	11/3/2024 19:54	11/3/2024 19:54	11/3/2024 19:54	00:14:05	MEDIC 402	RESP FROM TULSA
24-21443	11/3/2024 19:37	EMERGENCY SCENE									MUTUAL AID RECIEVED	
24-21477	11/4/2024 08:58	EMERGENCY SCENE	ST. FRANCIS TULSA	11/4/2024 08:58	11/4/2024 09:00	11/4/2024 09:04	11/4/2024 09:19	11/4/2024 09:41	11/4/2024 09:58	00:06:03	MEDIC 401	
24-21490	11/4/2024 11:26	EMERGENCY SCENE	ST. JOHN TULSA	11/4/2024 11:27	11/4/2024 11:31	11/4/2024 11:50	11/4/2024 12:31	11/4/2024 13:20	11/4/2024 13:42	00:23:39	MUTUAL AID GIVEN	
24-21492	11/4/2024 11:28	EMERGENCY SCENE	NO PATIENT FOUND	11/4/2024 11:29	11/4/2024 11:31	11/4/2024 11:35	11/4/2024 11:36	11/4/2024 11:36	11/4/2024 11:36	00:06:24	MEDIC 103	
24-21500	11/4/2024 12:35	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/4/2024 12:35	11/4/2024 12:37	11/4/2024 12:41	11/4/2024 13:02	11/4/2024 13:02	11/4/2024 13:02	00:05:44	MEDIC 103	
24-21526	11/4/2024 16:56	EMERGENCY SCENE	ST. JOHN SAPULPA	11/4/2024 16:56	11/4/2024 16:58	11/4/2024 17:01	11/4/2024 17:09	11/4/2024 17:26	11/4/2024 17:36	00:05:06	MEDIC 401	
24-21551	11/5/2024 06:21	EMERGENCY SCENE	ST. FRANCIS TULSA	11/5/2024 06:22	11/5/2024 06:25	11/5/2024 06:29	11/5/2024 06:36	11/5/2024 06:58	11/5/2024 07:17	00:07:59	MEDIC 401	
24-21554	11/5/2024 07:59	EMERGENCY SCENE	ST. JOHN TULSA	11/5/2024 07:59	11/5/2024 08:02	11/5/2024 08:05	11/5/2024 08:27	11/5/2024 08:46	11/5/2024 08:19	00:06:14	MEDIC 401	
24-21566	11/5/2024 10:30	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/5/2024 10:30	11/5/2024 10:32	11/5/2024 10:33	11/5/2024 11:05	11/5/2024 11:05	11/5/2024 11:05	00:03:04	MEDIC 401	
24-21576	11/5/2024 12:36	EMERGENCY SCENE	ST. FRANCIS TULSA	11/5/2024 12:36	11/5/2024 12:38	11/5/2024 12:44	11/5/2024 12:54	11/5/2024 13:08	11/5/2024 13:55	00:08:00	MEDIC 401	
24-21578	11/5/2024 12:43	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/5/2024 12:44	11/5/2024 12:47	11/5/2024 12:48	11/5/2024 13:09	11/5/2024 13:25	11/5/2024 13:53	00:04:31	MEDIC 103	
24-21580	11/5/2024 13:17	EMERGENCY SCENE	ST. FRANCIS TULSA	11/5/2024 13:17	11/5/2024 13:21	11/5/2024 13:24	11/5/2024 13:53	11/5/2024 14:16	11/5/2024 14:31	00:07:03	MEDIC 402	
24-21581	11/5/2024 13:22	EMERGENCY SCENE									MUTUAL AID RECIEVED	
24-21599	11/5/2024 15:09	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/5/2024 15:10	11/5/2024 15:11	11/5/2024 15:12	11/5/2024 15:28	11/5/2024 15:51	11/5/2024 16:42	00:02:22	MEDIC 401	
24-21620	11/6/2024 01:49	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	11/6/2024 01:50	11/6/2024 01:52	11/6/2024 01:55	11/6/2024 02:06	11/6/2024 02:06	11/6/2024 02:06	00:06:12	MEDIC 401	
24-21635	11/6/2024 07:45	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/6/2024 07:46	11/6/2024 07:48	11/6/2024 07:53	11/6/2024 08:08	11/6/2024 08:33	11/6/2024 08:46	00:07:29	MEDIC 401	
24-21659	11/6/2024 12:44	EMERGENCY SCENE	ST. FRANCIS TULSA	11/6/2024 12:45	11/6/2024 12:47	11/6/2024 12:51	11/6/2024 13:09	11/6/2024 13:30	11/6/2024 13:42	00:06:36	MEDIC 401	
24-21673	11/6/2024 15:05	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	11/6/2024 15:06	11/6/2024 15:07	11/6/2024 15:08	11/6/2024 15:50	11/6/2024 16:42	11/6/2024 16:44	00:03:19	MEDIC 401	
24-21675	11/6/2024 15:59	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	11/6/2024 16:00	11/6/2024 16:00	11/6/2024 16:18	11/6/2024 16:32	11/6/2024 16:56	11/6/2024 17:41	00:18:44	MEDIC 402	RESP FROM TULSA
24-21676	11/6/2024 16:19	EMERGENCY SCENE									MUTUAL AID RECIEVED	
24-21688	11/6/2024 18:44	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	11/6/2024 18:45	11/6/2024 18:46	11/6/2024 18:48	11/6/2024 19:26	11/6/2024 19:26	11/6/2024 19:26	00:03:28	MEDIC 401	
24-21694	11/6/2024 19:52	EMERGENCY SCENE	MUSCOGEECREEK NATION MEDICAL CEN	11/6/2024 19:53	11/6/2024 19:55	11/6/2024 20:25	11/6/2024 20:36	11/6/2024 20:47	11/6/2024 21:23	00:33:22	MUTUAL AID GIVEN	
24-21712	11/7/2024 09:50	EMERGENCY SCENE	ST. FRANCIS TULSA	11/7/2024 09:50	11/7/2024 09:51	11/7/2024 09:55	11/7/2024 10:04	11/7/2024 10:33	11/7/2024 10:53	00:05:04	MEDIC 401	
24-21733	11/7/2024 14:22	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/7/2024 14:22	11/7/2024 14:24	11/7/2024 14:27	11/7/2024 14:39	11/7/2024 14:39	11/7/2024 14:39	00:05:09	MEDIC 401	
24-21748	11/7/2024 18:01	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/7/2024 18:01	11/7/2024 18:03	11/7/2024 18:07	11/7/2024 18:23	11/7/2024 18:39	11/7/2024 18:58	00:06:23	MEDIC 401	
24-21752	11/7/2024 18:46	EMERGENCY SCENE									MUTUAL AID RECIEVED	
24-21765	11/8/2024 04:20	EMERGENCY SCENE	NO PATIENT FOUND	11/8/2024 04:22	11/8/2024 04:22	11/8/2024 04:32	11/8/2024 04:32	11/8/2024 04:32	11/8/2024 04:42	00:11:23	MUTUAL AID GIVEN	
24-21776	11/8/2024 06:32	EMERGENCY SCENE	OSU MEDICAL CENTER	11/8/2024 06:33	11/8/2024 06:34	11/8/2024 06:39	11/8/2024 07:14	11/8/2024 07:26	11/8/2024 07:26	00:06:50	MEDIC 401	
24-21833	11/8/2024 18:36	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/8/2024 18:37	11/8/2024 18:39	11/8/2024 18:45	11/8/2024 19:08	11/8/2024 19:08	11/8/2024 19:08	00:08:08	MEDIC 401	
24-21842	11/8/2024 20:54	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/8/2024 20:54	11/8/2024 20:57	11/8/2024 21:03	11/8/2024 21:24	11/8/2024 21:24	11/8/2024 21:24	00:09:28	MEDIC 401	
24-21859	11/9/2024 01:31	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/9/2024 01:31	11/9/2024 01:35	11/9/2024 01:39	11/9/2024 01:51	11/9/2024 02:11	11/9/2024 02:27	00:08:05	MEDIC 401	
24-21867	11/9/2024 09:18	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	11/9/2024 09:18	11/9/2024 09:21	11/9/2024 09:24	11/9/2024 09:54	11/9/2024 10:10	11/9/2024 10:10	00:06:11	MEDIC 401	
24-21876	11/9/2024 11:14	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/9/2024 11:14	11/9/2024 11:17	11/9/2024 11:23	11/9/2024 11:53	11/9/2024 12:09	11/9/2024 12:26	00:08:05	MEDIC 401	
24-21890	11/9/2024 14:50	EMERGENCY SCENE	ST. FRANCIS SOUTH	11/9/2024 14:50	11/9/2024 14:53	11/9/2024 14:56	11/9/2024 15:09	11/9/2024 15:30	11/9/2024 15:48	00:06:09	MEDIC 402	
24-21894	11/9/2024 16:05	EMERGENCY SCENE	ST. FRANCIS TULSA	11/9/2024 16:05	11/9/2024 16:08	11/9/2024 16:11	11/9/2024 16:37	11/9/2024 16:54	11/9/2024 17:13	00:06:23	MEDIC 401	
24-21909	11/10/2024 00:54	EMERGENCY SCENE	ST. FRANCIS TULSA	11/10/2024 00:54	11/10/2024 00:58	11/10/2024 01:02	11/10/2024 01:14	11/10/2024 01:38	11/10/2024 01:58	00:08:03	MEDIC 401	
24-21913	11/10/2024 09:49	EMERGENCY SCENE	ST. FRANCIS TULSA	11/10/2024 09:50	11/10/2024 09:52	11/10/2024 09:54	11/10/2024 10:15	11/10/2024 10:36	11/10/2024 10:52	00:05:20	MEDIC 401	
24-21917	11/10/2024 10:26	EMERGENCY SCENE	ST. FRANCIS TULSA	11/10/2024 10:27	11/10/2024 10:29	11/10/2024 10:35	11/10/2024 10:56	11/10/2024 11:19	11/10/2024 11:39	00:08:08	MEDIC 402	
24-21931	11/10/2024 14:24	EMERGENCY SCENE	ST. FRANCIS TULSA	11/10/2024 14:25	11/10/2024 14:28	11/10/2024 14:31	11/10/2024 14:44	11/10/2024 15:16	11/10/2024 15:26	00:06:30	MEDIC 401	
24-21935	11/10/2024 15:14	EMERGENCY SCENE									MUTUAL AID RECIEVED	

24-2194	11/10/2024	17:27	EMERGENCY SCENE												MUTUALAID RECEIVED	
24-2195	11/11/2024	04:28	EMERGENCY SCENE	HILLCREST SOUTH		11/11/2024 04:29	11/11/2024 04:33	11/11/2024 04:42	11/11/2024 05:00	11/11/2024 05:22	11/11/2024 05:38	00:13:43		MEDIC 401		
24-2196	11/11/2024	06:20	EMERGENCY SCENE	ST. JOHN TULSA		11/11/2024 06:20	11/11/2024 06:21	11/11/2024 06:21	11/11/2024 06:45	11/11/2024 07:11	11/11/2024 07:27	00:08:08		MEDIC 401		
24-2192	11/11/2024	07:58	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/11/2024 07:59	11/11/2024 08:01	11/11/2024 08:04	11/11/2024 08:22	11/11/2024 08:22	11/11/2024 08:22	00:05:24		MEDIC 4 01		
24-2200	11/11/2024	17:55	EMERGENCY SCENE											MUTUALAID RECEIVED		
24-2202	11/11/2024	18:55	EMERGENCY SCENE	ST. FRANCISOUTH		11/11/2024 18:55	11/11/2024 18:56	11/11/2024 19:03	11/11/2024 19:19	11/11/2024 19:36	11/11/2024 20:08	00:08:03		MEDIC 401		
24-2207	11/11/2024	21:06	EMERGENCY SCENE	ST. FRANCIS GLENPOOL		11/11/2024 21:07	11/11/2024 21:09	11/11/2024 21:13	11/11/2024 21:32	11/11/2024 21:41	11/11/2024 21:57	00:06:46		MEDIC 4 01		
24-2206	11/12/2024	12:20	EMERGENCY SCENE	OSU MEDICAL CENTER		11/12/2024 12:21	11/12/2024 12:22	11/12/2024 12:25	11/12/2024 12:46	11/12/2024 13:08	11/12/2024 13:39	00:04:51		MEDIC 401		
24-2201	11/12/2024	17:02	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/12/2024 17:02	11/12/2024 17:03	11/12/2024 17:07	11/12/2024 17:45	11/12/2024 17:45	11/12/2024 17:45	00:04:49		MEDIC 401		
24-2204	11/12/2024	17:41	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/12/2024 17:44	11/12/2024 17:45	11/12/2024 17:50	11/12/2024 18:46	11/12/2024 18:46	11/12/2024 18:46	00:08:03		MEDIC 401		
24-2205	11/12/2024	17:02	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/12/2024 17:02	11/12/2024 17:03	11/12/2024 17:07	11/12/2024 17:45	11/12/2024 17:45	11/12/2024 17:45	00:04:49		MEDIC 401		
24-2206	11/12/2024	17:02	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/12/2024 17:02	11/12/2024 17:03	11/12/2024 17:07	11/12/2024 17:45	11/12/2024 17:45	11/12/2024 17:45	00:04:49		MEDIC 401		
24-2207	11/12/2024	17:02	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/12/2024 17:02	11/12/2024 17:03	11/12/2024 17:07	11/12/2024 17:45	11/12/2024 17:45	11/12/2024 17:45	00:04:49		MEDIC 401		
24-2203	11/12/2024	19:01	EMERGENCY SCENE	ST. JOHN TULSA		11/12/2024 19:01	11/12/2024 19:02	11/12/2024 19:06	11/12/2024 19:24	11/12/2024 19:49	11/12/2024 20:20	00:05:34		MEDIC 401		
24-2209	11/12/2024	20:16	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/12/2024 20:16	11/12/2024 20:17	11/12/2024 20:28	11/12/2024 20:40	11/12/2024 20:40	11/12/2024 20:40	00:12:28		MEDIC 4 02		
24-2211	11/13/2024	09:16	EMERGENCY SCENE	DOA - DEAD ON ARRIVAL		11/13/2024 09:16	11/13/2024 09:17	11/13/2024 09:20	11/13/2024 09:32	11/13/2024 09:32	11/13/2024 09:32	00:03:56		MEDIC 4 01		
24-2217	11/13/2024	14:21	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/13/2024 14:22	11/13/2024 14:24	11/13/2024 14:29	11/13/2024 15:08	11/13/2024 15:08	11/13/2024 15:08	00:07:47		MEDIC 401		
24-2215	11/13/2024	16:41	EMERGENCY SCENE	ST. FRANCIS SOUTH		11/13/2024 16:41	11/13/2024 16:43	11/13/2024 16:45	11/13/2024 17:06	11/13/2024 17:29	11/13/2024 17:41	00:04:12		MEDIC 4 01		
24-2218	11/13/2024	21:39	EMERGENCY SCENE	ST. JOHN TULSA		11/13/2024 21:39	11/13/2024 21:42	11/13/2024 21:45	11/13/2024 22:02	11/13/2024 22:22	11/13/2024 22:36	00:06:17		MEDIC 4 01		
24-2213	11/14/2024	08:37	EMERGENCY SCENE	ST. FRANCIS SOUTH		11/14/2024 08:37	11/14/2024 08:39	11/14/2024 08:42	11/14/2024 08:54	11/14/2024 09:12	11/14/2024 09:25	00:05:21		MEDIC 401		
24-2215	11/14/2024	08:51	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/14/2024 08:52	11/14/2024 08:53	11/14/2024 08:57	11/14/2024 09:25	11/14/2024 09:25	11/14/2024 09:25	00:05:29		MEDIC 4 02		
24-2219	11/14/2024	10:48	EMERGENCY SCENE	ST. FRANCIS SOUTH		11/14/2024 10:48	11/14/2024 10:51	11/14/2024 10:53	11/14/2024 11:08	11/14/2024 11:28	11/14/2024 11:43	00:04:49		MEDIC 401		
24-2223	11/14/2024	15:46	EMERGENCY SCENE	HILLCREST SOUTH		11/14/2024 15:46	11/14/2024 15:48	11/14/2024 15:53	11/14/2024 16:03	11/14/2024 16:20	11/14/2024 16:40	00:07:03		MEDIC 401		
24-2226	11/14/2024	19:05	EMERGENCY SCENE	ST. FRANCISTULSA		11/14/2024 19:06	11/14/2024 19:08	11/14/2024 19:11	11/14/2024 19:19	11/14/2024 19:43	11/14/2024 19:57	00:05:39		MEDIC 401		
24-2244	11/14/2024	23:08	EMERGENCY SCENE	ST. FRANCISTULSA		11/14/2024 23:09	11/14/2024 23:11	11/14/2024 23:22	11/14/2024 23:48	11/15/2024 00:08	11/15/2024 00:25	00:14:00		MEDIC 4 01	STAGED	
24-2282	11/15/2024	11:48	EMERGENCY SCENE	ST. FRANCISOUTH		11/15/2024 11:48	11/15/2024 11:49	11/15/2024 11:56	11/15/2024 12:11	11/15/2024 12:30	11/15/2024 12:47	00:07:35		MEDIC 401		
24-2285	11/15/2024	12:22	EMERGENCY SCENE	ST. FRANCISTULSA		11/15/2024 12:23	11/15/2024 12:24	11/15/2024 12:27	11/15/2024 12:39	11/15/2024 13:05	11/15/2024 13:17	00:04:18		MEDIC 4 02		
24-2292	11/15/2024	13:44	EMERGENCY SCENE	ST. FRANCIS GLENPOOL		11/15/2024 13:45	11/15/2024 13:45	11/15/2024 13:53	11/15/2024 14:17	11/15/2024 14:21	11/15/2024 14:38	00:08:08		MEDIC 401		
24-2295	11/15/2024	14:25	EMERGENCY SCENE	ST. FRANCISTULSA		11/15/2024 14:26	11/15/2024 14:28	11/15/2024 14:32	11/15/2024 14:48	11/15/2024 16:15	11/15/2024 16:15	00:06:40		MEDIC 402		
24-2298	11/15/2024	15:04	EMERGENCY SCENE	ST. FRANCISTULSA		11/15/2024 15:04	11/15/2024 15:06	11/15/2024 15:22	11/15/2024 15:51	11/15/2024 16:19	11/15/2024 16:51	00:18:14		MUTUALAID GIVEN		
24-2307	11/15/2024	17:27	EMERGENCY SCENE	HILLCREST SOUTH		11/15/2024 17:28	11/15/2024 17:29	11/15/2024 17:34	11/15/2024 17:53	11/15/2024 18:19	11/15/2024 18:48	00:06:55		MEDIC 4 01		
24-2309	11/15/2024	18:02	EMERGENCY SCENE											MUTUALAID RECEIVED		
24-2318	11/15/2024	21:35	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE		11/15/2024 21:35	11/15/2024 21:38	11/15/2024 21:41	11/15/2024 21:41	11/15/2024 21:41	11/15/2024 21:41	00:06:34		MEDIC 4 01		
24-2325	11/16/2024	00:33	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/16/2024 00:33	11/16/2024 00:38	11/16/2024 00:42	11/16/2024 01:21	11/16/2024 01:21	11/16/2024 01:21	00:09:09		MEDIC 401	South of 181	
24-2358	11/16/2024	14:57	EMERGENCY SCENE	ST. FRANCIS SOUTH		11/16/2024 14:57	11/16/2024 14:59	11/16/2024 15:03	11/16/2024 15:12	11/16/2024 15:25	11/16/2024 15:41	00:06:40		MEDIC 401		
24-2372	11/16/2024	19:24	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE		11/16/2024 19:24	11/16/2024 19:27	11/16/2024 19:32	11/16/2024 19:36	11/16/2024 19:36	11/16/2024 19:36	00:07:45		MEDIC 401		
24-2383	11/16/2024	23:23	EMERGENCY SCENE	NO PATIENT FOUND		11/16/2024 23:24	11/16/2024 23:27	11/16/2024 23:33	11/16/2024 23:33	11/16/2024 23:33	11/16/2024 23:33	00:10:01		MEDIC 401		
24-2395	11/17/2024	05:57	EMERGENCY SCENE	HILLCREST MEDICAL CENTER		11/17/2024 05:57	11/17/2024 06:00	11/17/2024 06:04	11/17/2024 06:15	11/17/2024 06:29	11/17/2024 06:41	00:07:57		MEDIC 4 01		
24-2422	11/17/2024	19:11	EMERGENCY SCENE	ST. FRANCIS TULSA		11/17/2024 19:11	11/17/2024 19:14	11/17/2024 19:15	11/17/2024 19:24	11/17/2024 20:02	11/17/2024 20:24	00:04:14		MEDIC 401		
24-2424	11/17/2024	19:57	EMERGENCY SCENE	ST. FRANCIS GLENPOOL		11/17/2024 19:57	11/17/2024 20:00	11/17/2024 20:03	11/17/2024 20:34	11/17/2024 20:36	11/17/2024 20:49	00:05:24		MEDIC 4 02		
24-2426	11/17/2024	22:16	EMERGENCY SCENE	ST. FRANCIS TULSA		11/17/2024 22:16	11/17/2024 22:19	11/17/2024 22:23	11/17/2024 22:48	11/17/2024 23:14	11/17/2024 23:53	00:07:12		MEDIC 401		
24-2435	11/18/2024	03:54	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/18/2024 03:55	11/18/2024 03:59	11/18/2024 04:10	11/18/2024 04:27	11/18/2024 04:27	11/18/2024 04:27	00:15:49		MEDIC 401	South of 181	
24-2453	11/18/2024	10:14	EMERGENCY SCENE	ST. FRANCISTULSA		11/18/2024 10:15	11/18/2024 10:16	11/18/2024 10:20	11/18/2024 10:32	11/18/2024 10:53	11/18/2024 11:08	00:06:00		MEDIC 401		
24-2458	11/18/2024	10:53	EMERGENCY SCENE	ST. JOHN TULSA		11/18/2024 10:53	11/18/2024 10:55	11/18/2024 10:59	11/18/2024 11:28	11/18/2024 11:51	11/18/2024 12:41	00:06:00		MEDIC 110		
24-24 62	11/18/2024	11:22	EMERGENCY SCENE	ST. FRANCIS TULSA		11/18/2024 11:23	11/18/2024 11:27	11/18/2024 11:30	11/18/2024 11:42	11/18/2024 12:08	11/18/2024 12:30	00:08:12		MEDIC 402		
24-2474	11/18/2024	13:37	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE		11/18/2024 13:38	11/18/2024 13:39	11/18/2024 13:43	11/18/2024 13:45	11/18/2024 13:45	11/18/2024 13:45	00:05:21		MEDIC 401		
24-24 98	11/18/2024	18:40	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE		11/18/2024 18:40	11/18/2024 18:42	11/18/2024 18:48	11/18/2024 19:12	11/18/2024 19:12	11/18/2024 19:12	00:08:01		MEDIC 401		
24-2503	11/18/2024	19:53	EMERGENCY SCENE	ST. FRANCIS SOUTH		11/18/2024 19:53	11/18/2024 19:56	11/18/2024 20:03	11/18/2024 20:44	11/18/2024 20:44	11/18/2024 20:58	00:10:17		MUTUALAID GIVEN		
24-2512	11/19/2024	05:20	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE		11/19/2024 05:20	11/19/2024 05:24	11/19/2024 05:27	11/19/2024 05:39	11/19/2024 05:39	11/19/2024 05:39	00:06:37		MEDIC 401		
24-2519	11/19/2024	06:43	EMERGENCY SCENE	ST. JOHN TULSA		11/19/2024 06:45	11/19/2024 06:46	11/19/2024 06:49	11/19/2024 07:04	11/19/2024 07:30	11/19/2024 07:42	00:06:12		MEDIC 401		
24-2521	11/19/2024	08:40	EMERGENCY SCENE	ST. FRANCIS TULSA		11/19/2024 08:40	11/19/2024 08:42	11/19/2024 08:46	11/19/2024 09:09	11/19/2024 09:38	11/19/2024 09:56	00:06:23		MEDIC 401		
24-2550	11/19/2024	14:03	EMERGENCY SCENE	ST. FRANCIS TULSA		11/19/2024 14:03	11/19/2024 14:05	11/19/2024 14:09	11/19/2024 14:25	11/19/2024 14:55	11/19/2024 15:18	00:06:41		MEDIC 401		
24-2592	11/20/2024	01:59	EMERGENCY SCENE	ST. FRANCIS TULSA		11/20/2024 02:01	11/20/2024 02:03	11/20/2024 02:04	11/20/2024 02:26	11/20/2024 02:51	11/20/2024 03:13	00:04:59		MEDIC 4 01		
24-2604	11/20/2024	08:42	EMERGENCY SCENE	HILLCREST SOUTH		11/20/2024 08:43	11/20/2024 08:44	11/20/2024 08:48	11/20/2024 09:08	11/20/2024 09:14	11/20/2024 09:34	00:05:37		MEDIC 401		
24-2613	11/20/2024	10:35	EMERGENCY SCENE	ST. FRANCIS SOUTH		11/20/2024 10:35	11/20/2024 10:36	11/20/2024 10:38	11/20/2024 10:51	11/20/2024 11:10	11/20/2024 11:37	00:03:02		MEDIC 401		
24-2622	11/20/2024	12:52	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE		11/20/2024 12:53	11/20/2024 12:56	11/20/2024 12:58	11/20/2024 13:00	11/20/2024 13:00	11/20/2024 13:00	00:05:44		MEDIC 401		
24-2640	11/20/2024	16:00	EMERGENCY SCENE	SIGNED PATIENT REFUSAL		11/20/2024 16:00	11/20/2024 16:01	11/20/2024 16:04	11/20/2024 16:12	11/20/2024						

24-22690	11/21/2024 10:56	EMERGENCY SCENE	ST. FRANCIS TULSA	11/21/2024 10:57	11/21/2024 10:58	11/21/2024 11:01	11/21/2024 11:13	11/21/2024 11:37	11/21/2024 11:50	00:04:48	MEDIC 401	
24-22698	11/21/2024 13:31	EMERGENCY SCENE	DOA - DEAD ON ARRIVAL	11/21/2024 13:31	11/21/2024 13:33	11/21/2024 13:37	11/21/2024 13:54	11/21/2024 13:54	11/21/2024 13:54	00:05:38	MEDIC 401	
24-22796	11/22/2024 17:54	EMERGENCY SCENE	ST. FRANCIS TULSA	11/22/2024 17:54	11/22/2024 17:55	11/22/2024 18:00	11/22/2024 18:25	11/22/2024 18:50	11/22/2024 19:10	00:05:54	MEDIC 401	
24-22797	11/22/2024 17:54	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/22/2024 17:54	11/22/2024 17:55	11/22/2024 18:00	11/22/2024 18:23	11/22/2024 18:23	11/22/2024 18:23	00:05:54	MEDIC 401	
24-22811	11/23/2024 00:04	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/23/2024 00:04	11/23/2024 00:04	11/23/2024 00:09	11/23/2024 00:27	11/23/2024 00:27	11/23/2024 00:27	00:05:41	MEDIC 401	
24-22828	11/23/2024 09:23	EMERGENCY SCENE	CANCELLED BY PD OR OTHERSERVICE	11/23/2024 09:24	11/23/2024 09:27	11/23/2024 09:29	11/23/2024 10:13	11/23/2024 10:13	11/23/2024 10:13	00:05:27	MEDIC 401	
24-22833	11/23/2024 09:52	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	11/23/2024 09:53	11/23/2024 09:55	11/23/2024 09:57	11/23/2024 10:08	11/23/2024 10:15	11/23/2024 10:42	00:04:43	MEDIC 103	
24-22855	11/23/2024 15:04	EMERGENCY SCENE	ST. FRANCIS TULSA	11/23/2024 15:05	11/23/2024 15:07	11/23/2024 15:12	11/23/2024 15:24	11/23/2024 15:44	11/23/2024 16:00	00:08:03	MEDIC 401	
24-22860	11/23/2024 16:07	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/23/2024 16:08	11/23/2024 16:09	11/23/2024 16:13	11/23/2024 16:22	11/23/2024 16:22	11/23/2024 16:22	00:05:26	MEDIC 401	
24-22881	11/23/2024 23:20	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	11/23/2024 23:20	11/23/2024 23:23	11/23/2024 23:25	11/23/2024 23:52	11/23/2024 23:56	11/24/2024 00:07	00:05:07	MEDIC 401	
24-22906	11/24/2024 11:38	EMERGENCY SCENE	ST. FRANCIS TULSA	11/24/2024 11:39	11/24/2024 11:41	11/24/2024 11:45	11/24/2024 12:10	11/24/2024 12:32	11/24/2024 12:57	00:07:14	MEDIC 401	
24-22910	11/24/2024 11:38	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/24/2024 11:39	11/24/2024 11:41	11/24/2024 11:45	11/24/2024 12:11	11/24/2024 12:11	11/24/2024 12:11	00:07:14	MEDIC 401	
24-22911	11/24/2024 11:38	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/24/2024 11:39	11/24/2024 11:41	11/24/2024 11:45	11/24/2024 12:11	11/24/2024 12:11	11/24/2024 12:11	00:07:14	MEDIC 401	
24-22912	11/24/2024 11:38	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/24/2024 11:39	11/24/2024 11:41	11/24/2024 11:45	11/24/2024 12:11	11/24/2024 12:11	11/24/2024 12:11	00:07:14	MEDIC 401	
24-22913	11/24/2024 11:38	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	11/24/2024 11:39	11/24/2024 11:41	11/24/2024 11:45	11/24/2024 12:12	11/24/2024 12:12	11/24/2024 12:12	00:07:14	MEDIC 401	
24-22925	11/24/2024 16:57	EMERGENCY SCENE	ST. FRANCIS TULSA	11/24/2024 16:58	11/24/2024 17:01	11/24/2024 17:08	11/24/2024 17:28	11/24/2024 17:58	11/24/2024 18:15	00:10:46	MEDIC 401	

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



To Oklahoma & You.

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9626X0C.004 BNCF:0008404



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

2 *0008404
GLENPOOL AREA EMERGENCY MEDICAL
SERVICE DISTRICT
12205 S YUKON AVE
GLENPOOL OK 74033-6635

PAGE 1

ACCOUNT NUMBER
STATEMENT DATE
10/31/24

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ACCOUNT ANALYSIS

Beginning Balance	10/01/24	228,541.44
Deposits / Misc Credits	1	854.63
Withdrawals / Misc Debits	5	33,280.59
** Ending Balance	10/31/24	196,215.48 **

Service Charge	.00
Enclosures	5

DEPOSITS							
Date	Deposits	Withdrawals	Activity Description	Date	Check No.	Amount	
10/10	854.63		TULSA COUNTY/REMIT	10/17	2225	1,365.03	
CHECKS							
			* Indicates skip in check numbers				
Date	Check No.	Amount		Date	Check No.	Amount	
10/16	2220	15,000.00		10/16	2222	208.33	
10/15	2221	16,678.73		10/16	2224*	28.50	
DAILY BALANCE SUMMARY							
Date	Balance			Date	Balance		
10/10	229,496.07			10/16	197,580.61		
10/15	212,817.34			10/17	196,215.48		



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Statement Date: 10/31/24

PAGE 2

GLENPOOL AREA EMERGENCY 0143
MEDICAL SERVICE DISTRICT
12205 S YUKON AVE. PM #14 7403-4403
GLENPOOL, OK 74033-4403

BankFirst
Central, Oklahoma
30-38011037

002220

PAY ***** TWENTY TWO HUNDRED *****
DATE 10/16/2024 CHECK AMOUNT \$15,000.00

TO THE ORDER OF
** CENTURION HEALTH SYSTEMS, DBA MERCY REGIONAL **
12205 S YUKON AVE.
9306 N GARNET RD
CHASSO, OK 74055

10/16/2024 \$15,000.00

#002220#

GLENPOOL AREA EMERGENCY 0143
MEDICAL SERVICE DISTRICT
12205 S YUKON AVE. PM #14 7403-4403
GLENPOOL, OK 74033-4403

BankFirst
Central, Oklahoma
30-38011037

002221

PAY ***** TWENTY TWO HUNDRED TWENTY *****
DATE 10/15/2024 CHECK AMOUNT \$16,678.73

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

10/15/2024 \$16,678.73

#002221#

Number: 2220 Date: 10/16/2024 Amount: \$15000.00

Number: 2221 Date: 10/15/2024 Amount: \$16678.73

GLENPOOL AREA EMERGENCY 0143
MEDICAL SERVICE DISTRICT
12205 S YUKON AVE. PM #14 7403-4403
GLENPOOL, OK 74033-4403

BankFirst
Central, Oklahoma
30-38011037

002222

PAY ***** TWO HUNDRED EIGHT & 33/100 DOLLARS *****
DATE 10/16/2024 CHECK AMOUNT \$208.33

TO THE ORDER OF
** JOSHUA H. BRAINON **
12205 S YUKON AVE.
GLENPOOL, OK 74033

10/16/2024 \$208.33

#002222#

GLENPOOL AREA EMERGENCY 0143
MEDICAL SERVICE DISTRICT
12205 S YUKON AVE. PM #14 7403-4403
GLENPOOL, OK 74033-4403

BankFirst
Central, Oklahoma
30-38011037

002224

PAY ***** TWENTY EIGHT & 10/100 DOLLARS *****
DATE 10/16/2024 CHECK AMOUNT \$28.50

TO THE ORDER OF
** ROSENSTEIN, FIST & RINGOLD, INC. **
3016 700
525 SOUTH MAIN STREET
TULSA, OK 74103-4530

10/16/2024 \$28.50

#002224#

Number: 2222 Date: 10/16/2024 Amount: \$208.33

Number: 2224 Date: 10/16/2024 Amount: \$28.50

GLENPOOL AREA EMERGENCY 0143
MEDICAL SERVICE DISTRICT
12205 S YUKON AVE. PM #14 7403-4403
GLENPOOL, OK 74033-4403

BankFirst
Central, Oklahoma
30-38011037

002225

PAY ***** ONE THOUSAND THREE HUNDRED SIXTY FIVE & 13/100 DOLLARS *****
DATE 10/17/2024 CHECK AMOUNT \$1365.03

TO THE ORDER OF
** TULSA COUNTY ASSESSOR **
JENNIFER A. WILSON, AS
218 W. 6TH ST., 5TH FLOOR
TULSA, OK 74119

10/17/2024 \$1365.03

#002225#

Number: 2225 Date: 10/17/2024 Amount: \$1365.03

4021-00000



11/04/24 3:25 PM

BANK RECONCILIATION

PAGE: 1

PERIOD: 10/01/2024 - 10/31/2024

ACCOUNT: 31-1001 GEMS CASH IN BANK

RECONCILIATION SUMMARY

BEGINNING STATEMENT BALANCE:	228,641.44	GL ACCOUNT BALANCE:	196,007.15
DEPOSITS:	+ 854.63	OUTSTANDING DEPOSITS:	- 0.00
WITHDRAWALS:	+ 33,280.59CR	OUTSTANDING CHECKS:	- 208.33CR
ADJUSTMENTS:	+ 0.00	ADJUSTMENTS:	+ 0.00
ENDING STATEMENT BALANCE:	196,215.48	ADJUSTED GL ACCOUNT BALANCE:	196,215.48

STATEMENT BALANCE: 196,215.48
BANK DIFFERENCE: 0.00
G/L DIFFERENCE: 0.00

CLEARED DEPOSITS:

10/10/2024	OCT GEMS TAX DEP FROM TC	854.63
TOTAL CLEARED DEPOSITS:		854.63

CLEARED CHECKS:

10/08/2024	002220	CENTURION HEALTH SYSTEMS, DBA M	15,000.00CR
10/08/2024	002221	CITY OF GLENPOOL - GEMS	16,678.73CR
10/08/2024	002222	JOSHUA M. BRANNON	208.33CR
10/08/2024	002224	ROSENSTEIN, FIST & RINGOLD, INC	28.50CR
10/08/2024	002225	TULSA COUNTY ASSESSOR	1,365.03CR
TOTAL CLEARED CHECKS:			33,280.59CR

CLEARED OTHER:

No Items.

11/04/24 3:25 PM

BANK RECONCILIATION

PAGE: 2

PERIOD: 10/01/2024 - 10/31/2024

ACCOUNT: 31-1001 GEMS CASH IN BANK

OUTSTANDING DEPOSITS:
No Items.

OUTSTANDING CHECKS:

10/08/2024 002223 LESLI SMITH	208.33CR
TOTAL OUTSTANDING CHECKS:	208.33CR
	=====

OUTSTANDING OTHER:
No Items.

11-21-2024 07:59 AM

CITY OF GLENPOOL
BALANCE SHEET
AS OF: OCTOBER 31ST, 2024

PAGE: 1

31 -GEMS

ACCOUNT #	ACCOUNT DESCRIPTION	BALANCE
<u>ASSETS</u>		
=====		
31-1001	GEMS CASH IN BANK	196,007.15
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)
		<u>224,441.21</u>
TOTAL ASSETS		224,441.21
		=====
<u>LIABILITIES</u>		
=====		
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	<u>0.00</u>
<u>EQUITY</u>		
=====		
31-3001	FUND BALANCE	<u>334,818.20</u>
	TOTAL BEGINNING EQUITY	334,818.20
TOTAL REVENUE		3,775.18
TOTAL EXPENSES		<u>114,152.17</u>
TOTAL REVENUE OVER/(UNDER) EXPENSES		(110,376.99)
TOTAL EQUITY & REV. OVER/(UNDER) EXP.		<u>224,441.21</u>
TOTAL LIABILITIES, EQUITY & REV.OVER/(UNDER) EXP.		224,441.21
		=====

11-21-2024 08:01 AM

CITY OF GLENPOOL
PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
AS OF: OCTOBER 31ST, 2024

PAGE: 1

31 -GEMS
FINANCIAL SUMMARY

% OF YEAR COMPLETED: 33.33

	CURRENT BUDGET	CURRENT PERIOD	PRIOR YEAR PO ADJUST.	Y-T-D ACTUAL	Y-T-D ENCUMBRANCE	BUDGET BALANCE	% OF BUDGET
<u>REVENUE SUMMARY</u>							
NON-DEPARTMENTAL	423,904.00	854.63	0.00	3,775.18	0.00	420,128.82	0.89
TOTAL REVENUES	423,904.00	854.63	0.00	3,775.18	0.00	420,128.82	0.89
<u>EXPENDITURE SUMMARY</u>							
GEMS	423,904.00	0.00	0.00	114,152.17	33,211.29	276,540.54	34.76
TOTAL EXPENDITURES	423,904.00	0.00	0.00	114,152.17	33,211.29	276,540.54	34.76
REVENUE OVER/(UNDER) EXPENDITURES	0.00	854.63	0.00	(110,376.99)	(33,211.29)	0.00	0.00

11-21-2024 08:01 AM

CITY OF GLENPOOL
PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
AS OF:OCTOBER 31ST, 2024

PAGE: 2

31 -GEMS

% OF YEAR COMPLETED: 33.33

REVENUES	CURRENT BUDGET	CURRENT PERIOD	PRIOR YEAR PO ADJUST.	Y-T-D ACTUAL	Y-T-D ENCUMBRANCE	BUDGET BALANCE	% OF BUDGET
<u>NON-DEPARTMENTAL</u>							
<u>TAXES</u>							
31-5-00-5006 TAXES	385,000.00	854.63	0.00	3,775.18	0.00	381,224.82	0.98
TOTAL TAXES	385,000.00	854.63	0.00	3,775.18	0.00	381,224.82	0.98
<u>INVESTMENT INCOME</u>							
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
<u>OTHER FINANCING SOURCES</u>							
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	854.63	0.00	3,775.18	0.00	420,128.82	0.89
** TOTAL REVENUES **	423,904.00	854.63	0.00	3,775.18	0.00	420,128.82	0.89

11-21-2024 08:01 AM

CITY OF GLENPOOL
PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
AS OF: OCTOBER 31ST, 2024

PAGE: 3

31 -GEMS

% OF YEAR COMPLETED: 33.33

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	3,047.03	0.00	1,452.97	67.71
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	3,047.03	0.00	3,952.97	43.53
OTHER CHARGES & SERVICES							
31-6-01-6210 AMBULANCE CONTRACT	180,000.00	0.00	0.00	60,000.00	15,000.00	105,000.00	41.67
31-6-01-6225 FIRST RESPONDER/ADMIN FEES	177,379.00	0.00	0.00	49,589.83	17,794.63	109,994.54	37.99
31-6-01-6235 CONTRACT SERVICES	13,800.00	0.00	0.00	1,515.31	416.66	11,868.03	14.00
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	0.00	0.00	111,105.14	33,211.29	266,087.57	35.16
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	0.00	0.00	114,152.17	33,211.29	276,540.54	34.76
TOTAL EXPENDITURES	423,904.00	0.00	0.00	114,152.17	33,211.29	276,540.54	34.76
REVENUE OVER/(UNDER) EXPENDITURES	0.00	854.63	0.00	(110,376.99)	(33,211.29)	143,588.28	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		1.3%	1.5%	1.3%	1.2%	1.2%	1.4%
December		6.1%	5.4%	4.6%	5.9%	4.6%	9.2%
January		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 October 31, 2024 GEMS has received 1.0% of tax revenue budgeted.
In other words, \$3,775.18 has been received of the \$385,000 tax revenue budgeted.



GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: Engine 1

Date: 20 November 2024

FRONT ZIPPER POCKET

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

RIGHT ZIPPER POCKET

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

O2 LEFT SIDE POCKET

☒ 1-O2 Cylinder	psi	2000
☒ 2-Adult NRB		
☒ 2-Adult NC		
☒ 1-Adult BVM		

INSIDE POCKET

☒ 1-Blood Glucose Kit/Test Strips	Exp. Date:	13 April 2024
☒ 1-Tube Glucose 31g	Exp. Date:	28 February 2025
☒ Lancettes	☒ Adhesive Bandages	
☒ Alcohol Swabs	☒ 1-Tactical Tourniquet	
☒ 1-Thermometer	☒ 1-Samsplint	

FIRST AID BAG

☒ Medical Tape	☒ Flush
☒ Conban	☒ Band-aids
☒ Tri-Angle Bandage	☒ 4X4s
☒ Bandage Roll	☒ 3X3s

INSIDE CLEAR LID

☒ Sharps Shuttle	☒ Pen Light	☒ Hand Sanitizer
☒ Trauma Sheers	☒ Ring Cutter	
☒ Convenience Bags	☒ Bio Bag	

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 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

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

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		☒
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% Lidocaine Hcl	Exp. Date:	30 April 2024		
1 - Nebulizer Kit	☒			
3 - Albuterol 2.5mg	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: 20 November 2024

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)

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

Center Pocket

- | | | |
|------------------------|-------------------------------------|-----------------------|
| 2-Asherman chest seals | Seal: 888 | New Seal: 872 |
| | 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





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: R1

Date: 20 November 2024

FRONT ZIPPER POCKET

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

RIGHT ZIPPER POCKET

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

O2 LEFT SIDE POCKET

☒ 1-O2 Cylinder	psi	1700
☒ 2-Adult NRB		
☒ 2-Adult NC		
☒ 1-Adult BVM		

INSIDE POCKET

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

FIRST AID BAG

☒ Medical Tape	☒ Flush
☒ Conban	☒ Band-aids
☒ Tri-Angle Bandage	☒ 4X4s
☒ Bandage Roll	☐ 3X3s

INSIDE CLEAR LID

☒ Sharps Shuttle	☒ Pen Light	☒ Hand Sanitizer
☒ Trauma Sheers	☒ Ring Cutter	
☒ Convenience Bags	☒ Bio Bag	

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 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 December 2024	Exp. Date:	12 December 2026
2-22g IV	Exp. Date:	13 December 2024	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

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

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		☒
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	4 KAD	
Size 9.3	Exp. Date:	30 November 2024	Green	Exp. Date: 01 July 2024
Size 10	Exp. Date:	30 April 2024	Purple	Exp. Date: 06 October 2023
Size 10.7	Exp. Date:	25 July 2026	Yellow	Exp. Date: 01 July 2026
Size 11.3	Exp. Date:	28 February 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:	31 December 2024	Exp. Date: 31 December 2024
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% Lidocaine Hcl	Exp. Date:	28 February 2026	
1 - Nebulizer Kit	☒		
3 - Albuterol 2.5mg	Exp:	30 March 2025	Exp: 28 March 2025
1 - Levalbuterol 1.25mg	Exp. Date:	28 November 2025	Exp: 30 March 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	20 November 2024
-----------------	----------	-----------	----------	------	------------------

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)

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

Center Pocket

- | | | |
|------------------------|-------------------------------------|-----------------------|
| 2-Asherman chest seals | Seal: 822 | New Seal: 839 |
| | 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, November 4, 2024 Council Chambers 6:00 PM

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

TRUSTEES ABSENT:

STAFF PRESENT: Lesli Smith
Joshua Brannon

STAFF ABSENT:

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

Chair Calvert called the meeting to order at 6:23 p.m.

Prior to the Roll Call, City Manager Tillotson, announced to the Chair and Trustees that he received confirmation from the Tulsa County Board of Trustees, that Shayne Buchanan is eligible to vote as a GEMS trustee.

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 was also in attendance.

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

Mr. Cook gave a report for the dates of October 1, 2024, through October 30, 2024.

D) District Administrator Report -

No official District Administrator Report given.

E) Trustee Comments

Trustee Brobst thanked Director Brian Cook and Mercy Regional for their involvement and help at the recent Spooktacular event at Black Gold Park.

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) Minutes from the October 7, 2024, meeting.
- 2) Approval of purchase orders receiving report and payment claims as of October 25, 2024, totaling \$33,211.29

Moved by Chris Brobst, seconded by Tim Fox

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

There were no items on scheduled business.

J) Adjournment

The meeting was adjourned at 6:27 p.m.



To: HONORABLE CHAIR AND GEMS DISTRICT BOARD MEMBERS

From: JOSHUA BRANNON, DISTRICT TREASURER

Date: December 2, 2024

Subject: Approval of Purchase Orders Receiving Report and Payment Claims as of 11/26/2024 totaling \$33,610.84.

Staff Recommendation:

Staff recommends a motion to accept the PO Receipt Register report dated 11/26/2024 and approve the following payments:

P.O. #	ACCOUNT	VENDOR	DESCRIPTION	INV #	AMOUNT
25-20398	31-6-01-6210	Centurion Health Systems	Ambulance Service DEC 24	3265	\$15,000.00
25-20399	31-6-01-6225	City of Glenpool	1 st Responder NOV 2024	NOV2024	\$17,236.68
25-20400	31-6-01-6202	IMS, Inc.	Gloves for Fire Dept.	1338	\$872.00
25-20401	31-6-01-6235	Rosenstein, Fist & Ringold	Legal Services	166125	\$85.50
25-20402	31-6-01-6235	Lesli Smith	District Clerk	LS122024	\$208.33
25-20403	31-6-01-6235	Joshua Brannon	District Treasurer	JB122024	\$208.33
Total					\$33,610.84

Attachments:

1. Purchase Order Claims Register dated 11/26/2024 totaling \$33,610.84
2. PO Receipt Register dated 11/26/2024 totaling \$33,610.84
3. Purchase Orders and Invoices totaling \$33,610.84

11/26/2024 10:36 AM
SEQUENCE: VENDOR NAME (ALPHA)

P O R E C E I P T R E G I S T E R
AUDIT REPORT

PAGE: 1
DETAIL LEVEL: INVOICE

VENDOR	NAME	INVOICE	POST DATE BANK	INVOICE AMOUNT	VENDOR TOTAL
31-000004	CENTURION HEALTH SYSTEMS, DBA M	3265	12/01/2024 31	15,000.00	15,000.00
31-000005	CITY OF GLENPOOL - GEMS	NOV2024	12/02/2024 31	17,236.68	17,236.68
31-000021	IMS, INC.	1338	12/02/2024 31	872.00	872.00
31-000033	JOSHUA M. BRANNON	JB122024	12/02/2024 31	208.33	208.33
31-000032	LESLI SMITH	LS122024	12/02/2024 31	208.33	208.33
31-000027	ROSENSTEIN, FIST & RINGOLD, INC	166125	12/02/2024 31	85.50	85.50
TOTALS				33,610.84	33,610.84

APPROVED

BY

Joyce G. Calvert, Dec. 2, 2024

11/26/2024 10:38 AM
FUND: 31 - GEMS

PURCHASE ORDER CLAIM REGISTER
SUMMARY REPORT

PAGE: 1

PURCHASE ORDER	DESCRIPTION	VENDOR #	VENDOR NAME	DATE INVOICE	AMOUNT
DEPARTMENT: 01 - NON-DEPARTMENTAL					
25-20398	GEMS MERCY REG NOV 2024	31-000004	CENTURION HEALTH SYSTEMS,DBA	12/2024 3265	15,000.00
25-20399	1ST RESPONDER NOV 2024	31-000005	CITY OF GLENPOOL - GEMS	12/2024 NOV2024	17,236.68
25-20400	GLOVES FOR FIRE DEPT	31-000021	IMS, INC.	12/2024 1338	872.00
25-20401	RFR GEMS INVOICE 166125	31-000027	ROSENSTEIN,FIST & RINGOLD, IN	12/2024 166125	85.50
25-20402	GEMS L. SMITH NOV 2024	31-000032	LESLI SMITH	12/2024 LS122024	208.33
25-20403	GEMS J BRANNON NOV 2024	31-000033	JOSHUA M. BRANNON	12/2024 JB122024	208.33
DEPARTMENT TOTAL:					33,610.84
FUND TOTAL:					33,610.84
GRAND TOTAL:					33,610.84

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 # 25-20398

11/26/2024

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.

11/26/2024

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.

11/26/2024

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS MERCY REG NOV 2024 INVOICE 3265 GEMS MERCY REG NOV 2024		00037510	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 VENDOR'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 POLITICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT.
ANY VENDOR WHO SUBMITS AN 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# 00037510

Mercy Regional Oklahoma

Owasso, OK 74055

Invoice

Date	Invoice #
11/12/2024	3265

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 December	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 # 25-20399 11/26/2024

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.

11/26/2024

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. 11/26/2024

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	1ST RESPONDER NOV 2024 1ST RESPONDER NOV 2024		00037515	31 -6-01-6225		0.00	17,236.68 *

** TOTAL ** 17,236.68

*** 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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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 POLITICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT.
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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.



INVOICE

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

Customer Number: 01-0172

Invoice Number: NOV2024

Invoice Date: 11/26/2024

Due Date: 12/26/2024

P.O. # :

TREASURER
GEMS-
12205 S YUKON AVE
GLENPOOL OK 74033

ITEM DESCRIPTION	UNITS	TYPE	PRICE	AMOUNT
GEMS REIMBURSEMENT NOV 2024	N/A	MONTH	N/A	17,236.68
NOVEMBER 2024				
*****THANK YOU*****			TOTAL DUE	\$17,236.68

Reg# 00037515

GEMS ADMIN/FIRST RESPONDER REIMBURSEMENTS

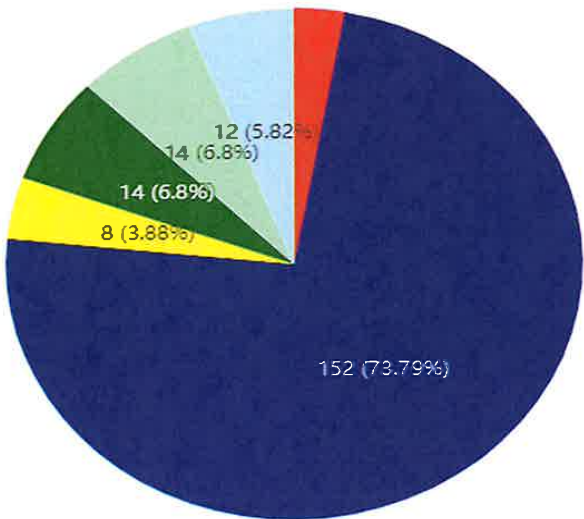
FY 24/25 NOV 2024 10/21/2024-11/19/2024

TOTAL RUNS	206
EMR RUNS	152
FIRE RUNS	54
EMR RATIO	73.79%
RUN RATE	\$111.59
ADMIN	\$275.00
OVERTIME	\$0.00
TOTAL	\$17,236.68

Glenpool Fire Department Operations November 2024 10/21/24-11/19/24

Run Type	# of Calls	Totals Calls
EMS Runs	152	206
Fire Runs	54	
Overlapping	32	

Total (206)



Incident Type Series

6	1 - Fire
152	3 - Rescue & Emergency Medical Service Incident
8	4 - Hazardous Condition (No Fire)
14	5 - Service Call
14	6 - Good Intent Call
12	7 - False Alarm & False Call
206	

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 # 25-20400

11/26/2024

ISSUED TO: VEND #: 31-000021
IMS, INC.
SUITE A
12311 S. 74TH E. AVE.
BIXBY, OK 74008

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

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

11/26/2024

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.

11/26/2024

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GLOVES FOR FIRE DEPT ESTIMATE QUOTE # 1338 GLOVES FOR FIRE DEPT		00037514	31 -6-01-6202		0.00	872.00 *

** TOTAL **

872.00

*** 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 VENDOR'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 POLITICAL 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.

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VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Reg # 00037514

IMS, Inc.

112311 S 74th E Ave
Tulsa, OK 74008
(800) 476-9657

Quote

Date	Estimate #
11/20/2024	1338

Name / Address
Glenpool Fire Dept Max Wilson 12205 S Yukon Ave Glenpool, OK 74033

Ship To
Glenpool Fire Dept Max Wilson 12205 S Yukon Ave Glenpool, OK 74033

Item	Description	Qty	Price	Total
NPFT2640-CS	NPFT2640 Surecare Powder Free Black Nitrile Gloves, Large CASE	2	109.00	218.00
NPFT2650-CS	NPFT2650 Surecare Powder Free Black Nitrile Gloves, X-Large CASE	6	109.00	654.00
	Sales Tax		0.00	0.00
			Total	\$872.00

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 # 25-20401

11/26/2024

ISSUED TO: VEND #: 31-000027
 ROSENSTEIN, FIST & RINGOLD,
 SUITE 700
 525 SOUTH MAIN STREET
 TULSA, OK 74103-4508

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

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

11/26/2024

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11/26/2024

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	RFR GEMS INVOICE 166125 166125 INVOICE GEN MATTERS RFR GEMS INVOICE 166125		00037447	31 -6-01-6235		0.00	85.50 *

** TOTAL **

85.50

*** APPROVAL FOR PURCHASE ***

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OFFICER OR DEPARTMENT HEAD IN CHARGE

DATE

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Reg
37447

Rosenstein, Fist & Ringold
525 S. Main, Suite 700
Tulsa, OK 74103-4508
Telephone No. (918) 585-9211
Facsimile No. (918) 583-5617
Internet Web Site - www.rfllaw.com

Glenpool Emergency Medical Svc
12205 S. Yukon Ave.
Glenpool, OK 74033

November 8, 2024
Invoice No.: 166125

Regarding: General

Our File No.: 301908 - 0001

Total fees for professional services rendered through:
October 31, 2024 \$85.50

Total expense advances made to your account through:
October 31, 2024 \$0.00

Total Amount Due This Invoice \$85.50

OK
JS

To ensure proper credit to your account, please include this invoice
number on your check.

Federal Tax ID: 73-0787744

Rosenstein, Fist & Ringold
525 S. Main, Suite 700
Tulsa, OK 74103-4508

Telephone No. (918) 585-9211
Facsimile No. (918) 583-5617
Internet Web Site - www.rfirlaw.com

Invoice Number: 166125
Invoice Date: 11/08/2024
Activity Billed Through: 10/31/2024
Billing Attorney Initials: EDW

Glenpool Emergency Medical Svc
12205 S. Yukon Ave.
Glenpool, OK 74033

Regarding: General

Our File No.: 301908 - 0001

For professional services rendered:

			<u>Hours</u>	<u>Fees</u>
10/23/2024	EDW	238	0.30	85.50
Review research memorandum and legal authorities regarding confidentiality of first responder's records containing medical information.				

Total professional services: \$85.50

For expenses advanced or incurred:

Total expenses advanced:	\$0.00
Total billed this invoice:	<u>\$85.50</u>

Account Summary:

Unpaid balance forward as of invoice date:	\$0.00
Total billed this invoice:	85.50
Please pay this amount:	<u>\$85.50</u>

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 # 25-20402 11/26/2024

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.

11/26/2024

PURCHASING OFFICER

DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN
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SAID APPROPRIATION. 11/26/2024

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS L. SMITH NOV 2024 INV NO. LS122024 GEMS L. SMITH NOV 2024		00037509	31 -6-01-6235		0.00	208.33 *

** TOTAL ** 208.33

*** APPROVAL FOR PURCHASE ***

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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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Reg# 000 31509

INVOICE

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

INVOICE #: LS122024

DATE: 12/1/2024

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	
NOVEMBER 2024	\$208.33

Total	\$208.33
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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 # 25-20403 11/26/2024

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.

11/26/2024

PURCHASING OFFICER

DATE

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ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS J BRANNON NOV 2024 INVOICE. JB122024 GEMS J BRANNON NOV 2024		00037508	31 -6-01-6235		0.00	208.33 *

** TOTAL ** 208.33

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Memo

To: Honorable Mayor and City Council/ GEMS Board
From: Max Wilson, Deputy Fire Chief
CC: File
Date: 11/20/24
Re: Approval to send (2) Firefighters to EMT-A class

Background:

We are a department that is constantly striving to improve our service to the community and intend to pursue advanced EMT (EMT-A) certification for our members. Our goal is to provide the best level of care possible for our patients/citizens. As such, we have two firefighters who are ready to take the EMT-A certification class and are requesting GEMS Board approval to pay the tuition and costs for classroom books. This class has traditionally been paid for from the GEMS budget. Cost to attend for tuition and books is \$1,400.00 per person.

Staff Recommendation:

Staff recommends the Board approve paying the cost of tuition and books for two firefighters to attend the EMT-A certification class at a cost of \$2,800. Funds for this class would be encumbered from 31-6-01-6262.