

**NOTICE
GLENPOOL AREA EMERGENCY MEDICAL SERVICE
DISTRICT
SPECIAL MEETING**

A Special Session of the Glenpool Area Emergency Medical Service District will be held at 6:00 p.m. immediately following the Glenpool City Council meeting on July 18, 2022, 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/j/89753555435?pwd=QzdFVjA1b0lKa1lSUFlKbUNrUUxtdz09>

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: Wknight@cityofglenpool.com **PRIOR TO 6:00 PM JULY 18, 2022.**

AGENDA

Page

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

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

C) **Trustee Comments**

D) **Public Comments**

E) **Scheduled Business**

- 1) Discussion and possible action to approve, or deny purchase order(s) and receipts register totaling \$ \$15,265.95.
(Frank Ordaz, District Treasurer)
[GEMS Invoice 7-18-22](#)

3 - 10

F) Adjournment

This notice and agenda was posted at Glenpool City Hall, 12205 S. Yukon Ave., Glenpool, Oklahoma, on July 14, 2022, by 4:00 pm.

Signed: Wendy Knight

Clerk



To: HONORABLE CHAIR AND GEMS DISTRICT BOARD MEMBERS

From: FRANCISCO ORDAZ, DISTRICT TREASURER

Date: July 13, 2022

Subject: Approval of Purchase Orders Receiving Report and Payment Claims as of 7/13/2022 totaling \$15,265.95

Background:

A purchase order receiving report and a list of claims to be paid is presented to the Board monthly for approval.

Staff Recommendation:

Staff recommends a motion to accept the PO Receipt Register report dated 7/13/2022 and approve the following payments:

P.O. #	ACCOUNT	VENDOR	DESCRIPTION	INV #	AMOUNT
23-14383	31-6-01-6210	Centurion Health System	July 22 Ambulance Service	2842	\$15,000.00
23-14384	31-6-01-6202	Laerdal Medical Corp.	NIMH Batteries	Q-584390	\$265.95
Total					\$15,265.95

Attachments:

1. Purchase Order Claims Register dated 7/13/2022 totaling \$15,265.95
2. PO Receipt Register dated 7/13/2022 totaling \$15,265.95
3. Purchase Orders and Invoices totaling \$15,265.95

7/13/2022 9:07 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	2842	7/14/2022	31	15,000.00	15,000.00
31-000028	LAERDAL MEDICAL CORPORATION	Q-584390	7/14/2022	31	265.95	265.95
TOTALS					15,265.95	15,265.95

APPROVED

By

Joyce Calvert, Chair
July 18, 2022

7/13/2022 9:08 AM
FUND: 31 - GEMS

P U R C H A S E O R D E R C L A I M R E G I S T E R
S U M M A R Y R E P O R T

PAGE: 1

PURCHASE ORDER	DESCRIPTION	VENDOR #	VENDOR NAME	DATE INVOICE	AMOUNT
DEPARTMENT: 01 - NON-DEPARTMENTAL					
23-14383	AMBULANCE SUBSIDE JUL 202	31-000004	CENTURION HEALTH SYSTEMS, DBA	7/2022 2842	15,000.00
23-14384	NiMH BATTERIES	31-000028	LAERDAL MEDICAL CORPORATION	7/2022 Q-584390	265.95
DEPARTMENT TOTAL:					15,265.95
FUND TOTAL:					15,265.95
GRAND TOTAL:					15,265.95

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 # 23-14383

07/12/2022

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.



07/12/2022

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.



07/12/2022

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	AMBULANCE SUBSIDE JUL 2022		00029567	31 -6-01-6210		0.00	15,000.00 *
	AMBULANCE SUBSIDE JUL 2022						

** 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.



7/13/22

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

Mercy Regional Oklahoma
Owasso, OK 74055

29567

Invoice

Date	Invoice #
6/10/2022	2842

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

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	ALS Ambulance Subsidy for July	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 # 23-14384

07/12/2022

ISSUED TO: VEND #: 31-000028
LAERDAL MEDICAL CORPORATIO
167 MYERS CORNERS RD.
WAPPINGERS FALLS, NY 12590

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

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

07/12/2022

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.

07/12/2022

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	NiMH BATTERIES NiMH BATTERIES		00029571	31 -6-01-6202		0.00	265.95 *

** TOTAL **

265.95

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



29568

29571

Laerdal Medical Corporation
167 Myers Corners Road
Wappingers Falls, NY 12590
Phone Order To: 877-LAERDAL
Fax Order To: (800) 227-1143
Email: customerservice@laerdal.com

Customer Service
(877) 523-7325 Option 1
customerservice@laerdal.com

To prevent any delays in processing your purchase, please include your quote # when ordering.

DATE: 7/1/2022
ATTN: Chad Tanner
+19182690212
ctanner@cityofglenpool.com

QUOTE NUMBER: Q-584390
CREDIT TERMS: CC
EXPIRATION DATE: 10/29/2022

BILL TO: 31508933
Glenpool Fire Department
12205 South Yukon Avenue
Glenpool OK 74033

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
2	780800	LSU NiMH battery	\$122.00	\$122.00	\$244.00
TOTAL:					\$244.00

ITEM TOTAL : \$244.00
SHIPPING/HANDLING : \$21.95
LOGISTIC SURCHARGE : \$0.00
TAX : ~~\$24.32~~
TOTAL : ~~\$290.27~~
265.95

There are various payment options; please see bottom of your quote for further clarification.
Appropriate Sales Tax will be added to invoice - Pricing and Availability are subject to change
Shipping/Handling costs will be added to invoice

By Accepting this Quote, the following terms are hereby incorporated into customer's order:

Products:

Products that are currently on contract will be removed immediately if manufacturing or distribution of the product is discontinued.

Payment:

Net 30 Days for approved open accounts; CIA; Credit Cards accepted. Financing options now available – sample leasing payment terms follow.

Warranty:

One(1) year warranty on manufactured products and 90 day warranty on refurbished products
Two(2) year parts replacement warranty with technical assistance by phone on all Hill-Rom refurbished products

Delivery:

Delivery of product to a specific location within your building, if requested is at an additional charge and not included in this quote

Training/Education:

Onsite and Virtual Education will expire one (1) year from date of purchase. Exceptions include:

- Educational Pathway trainings will expire two (2) years from date of purchase. Five (5) or more Ed Path Training days will expire in five (5) years.
- Contracts/Technology Sustainment Program (TSP)
- Advanced Care & Maintenance Courses

CANCELLATION or RESCHEDULING of EDUCATIONAL or TECHNICAL SERVICES WILL RESULT IN CANCELLATION/RESCHEDULING FEES.

7 DAYS OR LESS: 100% of Course / Service Cost
8 DAYS to 2 WEEKS: 75% of Course / Service Cost
15 DAYS to 20 DAYS: 50% of Course / Service Cost
3 WEEKS or MORE: NO FEE

Customer will be required to submit a new PO to reschedule a cancelled course / service.

Confidential