

March 2, 2026 - 6:00 PM
Glenpool City Hall, City Council Chambers
12205 S. Yukon Ave. 3rd Floor
Glenpool, Oklahoma

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.

NOTE: 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=QzdFVjA1b0lKa1lSUFkKbUNrUUxtdz09>

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=QzdFVjA1b0lKa1lSUFkKbUNrUUxtdz09>

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

- Speakers attending via ZOOM are required to complete the Request to Speak form located on our website: <https://www.glenpoolonline.com/DocumentCenter/View/2551/request-to-speak-at-open-meeting-forms-2025?bidId> = and email it to the City Clerk: lasmith@cityofglenpool.com PRIOR TO 6:00 PM CALL TO ORDER.

AGENDA

- A) **Call to Order - Joyce G. Calvert, Chair**
- B) **Roll Call, Declaration of a Quorum - Lesli Smith, City Clerk; Joyce G. Calvert, Chair**
- C) **EMS Report- Brian Cook, Director of Operations, Mercy Regional EMS**
 - 1) EMS Report
- D) **District Administrator Report-**
 - 1) District Administrator Report
- 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) To approve the minutes from the February 2, 2026, meeting.
- 2) To approve the purchase orders receiving report and payment claims as of 2/25/2026 totaling \$32,186.38.

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., Oklahoma, on 2-27-2026 11:30 a.m.

Signed: Lesli Smith
City Clerk



Respond. Serve. Care.
MERCY-REGIONAL.COM
918.609.5800

To: Honorable Chair and GEMS Board Members
From: Brian Cook, Chief Operating Officer
Date: February 26, 2026
Ref: EMS Report January 27, 2026 – February 25, 2026

We logged 160 calls for service during this period while maintaining a 94% response time compliance.

118 patients were treated and transported.

27 patients refused transport.

8 cancelled prior to arrival.

1 Mutual aid received.

4 DOA

2 false calls

A handwritten signature in black ink that reads "Brian Cook". The signature is written in a cursive style with a large, stylized "B" and "C".

Brian Cook,
Chief Operating Officer

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

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

Run Number	Incident Created	DispatchedTime	Enroute_Resulting	AtScene_Resulting	ResponseTime	Late reason	Transporting_Resulting	AtDestination_Resulting	Completed_Resulting	Cancelled Reason	Destination	VehicleName
699748	1/27/2026 03:43	1/27/2026 03:43	1/27/2026 03:46	1/27/2026 03:50	0:06:34					Unit on Scene Cancelled		MERCY 401
699932	1/27/2026 07:34	1/27/2026 07:35	1/27/2026 07:36	1/27/2026 07:41	0:05:54					Patient Refusal		MERCY 401
700395	1/27/2026 11:03	1/27/2026 11:03	1/27/2026 11:04	1/27/2026 11:10	0:06:45					Patient Refusal		MERCY 401
700450	1/27/2026 11:20	1/27/2026 11:21	1/27/2026 11:22	1/27/2026 11:27	0:05:56					Patient Refusal		MERCY 402
700612	1/27/2026 12:14	1/27/2026 12:14	1/27/2026 12:15	1/27/2026 12:19	0:05:09		1/27/2026 12:39	1/27/2026 13:01	1/27/2026 13:33		St Francis South Hospital	MERCY 401
701014	1/27/2026 13:56	1/27/2026 13:57	1/27/2026 13:57	1/27/2026 14:02	0:05:24		1/27/2026 14:22	1/27/2026 15:01	1/27/2026 15:31		Hillcrest Medical Center	MERCY 401
701857	1/27/2026 20:37	1/27/2026 20:38	1/27/2026 20:42	1/27/2026 20:43	0:05:22		1/27/2026 21:13	1/27/2026 21:35	1/27/2026 21:51		St Francis Tulsa Hospital	MERCY 401
701858	1/27/2026 20:39	1/27/2026 20:40	1/27/2026 20:42	1/27/2026 20:45	0:05:46		1/27/2026 21:05	1/27/2026 21:27	1/27/2026 21:49		St Francis Tulsa Hospital	MERCY 402
702460	1/28/2026 06:16	1/28/2026 06:17	1/28/2026 06:20	1/28/2026 06:24	0:06:09		1/28/2026 06:51	1/28/2026 07:14	1/28/2026 07:34		Hillcrest South Hospital	MERCY 401
703565	1/28/2026 13:47	1/28/2026 13:48	1/28/2026 13:49	1/28/2026 13:52	0:03:50		1/28/2026 14:04	1/28/2026 14:25	1/28/2026 14:46		St Francis South Hospital	MERCY 401
704083	1/28/2026 16:12	1/28/2026 16:12	1/28/2026 16:13	1/28/2026 16:19	0:06:39					Patient Refusal		MERCY 401
704149	1/28/2026 16:43	1/28/2026 16:43	1/28/2026 16:44	1/28/2026 16:53	0:09:08		1/28/2026 17:03	1/28/2026 17:32	1/28/2026 17:48		St Francis Tulsa Hospital	MERCY 401
704541	1/28/2026 20:20	1/28/2026 20:20	1/28/2026 20:22	1/28/2026 20:26	0:05:11		1/28/2026 20:47	1/28/2026 21:16	1/28/2026 21:36		St Francis South Hospital	MERCY 401
704698	1/28/2026 22:21	1/28/2026 22:21	1/28/2026 22:22	1/28/2026 22:33	0:11:14					Patient Refusal		MERCY 401
704934	1/29/2026 01:54	1/29/2026 01:55	1/29/2026 01:57	1/29/2026 02:02	0:06:33		1/29/2026 02:15	1/29/2026 02:36	1/29/2026 02:52		St Francis South Hospital	MERCY 401
705062	1/29/2026 05:33	1/29/2026 05:33	1/29/2026 05:34	1/29/2026 05:41	0:07:28		1/29/2026 05:53	1/29/2026 06:19	1/29/2026 06:38		St Francis Tulsa Hospital	MERCY 401
706893	1/29/2026 18:49	1/29/2026 18:50	1/29/2026 18:50	1/29/2026 18:55	0:04:58		1/29/2026 19:20	1/29/2026 19:42	1/29/2026 20:26		St Francis Tulsa Hospital	MERCY 401
706962	1/29/2026 19:31	1/29/2026 19:40								Sent Mutual Aid		MERCY 401
707095	1/29/2026 21:05	1/29/2026 21:05	1/29/2026 21:07	1/29/2026 21:10	0:05:10		1/29/2026 21:26	1/29/2026 21:42	1/29/2026 21:59		St Francis Tulsa Hospital	MERCY 401
707293	1/29/2026 23:14	1/29/2026 23:14	1/29/2026 23:17	1/29/2026 23:20	0:06:12		1/29/2026 23:49	1/30/2026 00:06	1/30/2026 00:58		Hillcrest South Hospital	MERCY 401
707403	1/30/2026 01:08	1/30/2026 01:08	1/30/2026 01:09	1/30/2026 01:17	0:08:35		1/30/2026 01:37	1/30/2026 01:57	1/30/2026 02:15		St John Tulsa Medical Center	MERCY 401
707671	1/30/2026 08:00	1/30/2026 08:00	1/30/2026 08:01	1/30/2026 08:05	0:04:41		1/30/2026 08:17	1/30/2026 08:44	1/30/2026 08:57		MERCY 401	
707673	1/30/2026 08:00	1/30/2026 08:01	1/30/2026 08:01	1/30/2026 08:05	0:04:41		1/30/2026 08:17	1/30/2026 08:44	1/30/2026 08:57		St Francis South Hospital	MERCY 401
707673	1/30/2026 08:00	1/30/2026 08:03									St Francis South Hospital	MERCY 401
708071	1/30/2026 11:29	1/30/2026 11:29	1/30/2026 11:30	1/30/2026 11:34	0:05:25		1/30/2026 11:51	1/30/2026 12:20	1/30/2026 12:34		St Francis South Hospital	MERCY 401
708260	1/30/2026 12:27	1/30/2026 12:28	1/30/2026 12:31	1/30/2026 12:34	0:06:15		1/30/2026 12:59	1/30/2026 13:21	1/30/2026 13:50		St Francis Tulsa Hospital	MERCY 402
708401	1/30/2026 12:54	1/30/2026 12:54	1/30/2026 12:55	1/30/2026 12:59	0:04:51					DOA		MERCY 401
708872	1/30/2026 15:22	1/30/2026 15:22	1/30/2026 15:22	1/30/2026 15:22	0:00:25		1/30/2026 15:36	1/30/2026 15:59	1/30/2026 16:25		St John Tulsa Medical Center	MERCY 402
710746	1/31/2026 15:33	1/31/2026 15:34	1/31/2026 15:36	1/31/2026 15:49	0:04:50		1/31/2026 16:52	1/31/2026 16:55	1/31/2026 16:06		St Francis Glenpool	MERCY 401
710865	1/31/2026 17:01	1/31/2026 17:01	1/31/2026 17:04	1/31/2026 17:11	0:09:22		1/31/2026 17:25	1/31/2026 17:48	1/31/2026 18:03		St Francis Tulsa Hospital	MERCY 401
710943	1/31/2026 17:58	1/31/2026 17:58	1/31/2026 17:59	1/31/2026 18:07	0:09:57		1/31/2026 18:27	1/31/2026 18:45	1/31/2026 19:02		St John Tulsa Medical Center	MERCY 203
710962	1/31/2026 18:15	1/31/2026 18:15	1/31/2026 18:15	1/31/2026 18:16	0:01:01		1/31/2026 18:33	1/31/2026 19:03	1/31/2026 19:03		St John Tulsa Medical Center	MERCY 401
711070	1/31/2026 19:29	1/31/2026 19:29	1/31/2026 19:29	1/31/2026 19:33	0:03:33		1/31/2026 19:48	1/31/2026 20:07	1/31/2026 20:30		St Francis Tulsa Hospital	MERCY 401
711080	1/31/2026 19:38	1/31/2026 19:39	1/31/2026 19:40	1/31/2026 19:45	0:05:44		1/31/2026 19:56	1/31/2026 20:17	1/31/2026 20:35		St Francis Tulsa Hospital	MERCY 402
711288	1/31/2026 23:05	1/31/2026 23:05	1/31/2026 23:05	1/31/2026 23:12	0:06:24		1/31/2026 23:23	1/31/2026 23:40	1/31/2026 23:54		St Francis Tulsa Hospital	MERCY 401
711591	2/1/2026 05:41	2/1/2026 05:43	2/1/2026 05:43	2/1/2026 05:45	0:06:42		2/1/2026 06:04	2/1/2026 06:21	2/1/2026 06:38		St Francis Tulsa Hospital	MERCY 401
712347	2/1/2026 16:24	2/1/2026 16:25	2/1/2026 16:25	2/1/2026 16:28	0:03:42		2/1/2026 16:47	2/1/2026 17:10	2/1/2026 17:25		St Francis South Hospital	MERCY 401
712357	2/1/2026 16:27	2/1/2026 16:28	2/1/2026 16:31	2/1/2026 16:34	0:05:46					Patient Refusal		MERCY 402
712676	2/1/2026 21:10	2/1/2026 21:10	2/1/2026 21:12	2/1/2026 21:14	0:04:34					Patient Refusal		MERCY 401
712734	2/1/2026 22:05	2/1/2026 22:06	2/1/2026 22:08	2/1/2026 22:10	0:03:58		2/1/2026 22:27	2/1/2026 22:42	2/1/2026 23:04		St Francis South Hospital	MERCY 401
713011	2/2/2026 02:07	2/2/2026 02:08	2/2/2026 02:10	2/2/2026 02:14	0:06:40		2/2/2026 02:30	2/2/2026 02:46	2/2/2026 03:01		Hillcrest South Hospital	MERCY 401
713323	2/2/2026 08:30	2/2/2026 08:30	2/2/2026 08:31	2/2/2026 08:36	0:06:00		2/2/2026 08:47	2/2/2026 09:12	2/2/2026 09:40		St Francis South Hospital	MERCY 401
714832	2/2/2026 17:47	2/2/2026 17:47	2/2/2026 17:49	2/2/2026 17:50	0:03:21		2/2/2026 17:50	2/2/2026 17:45	2/2/2026 18:12		St Francis Tulsa Hospital	MERCY 401
716230	2/3/2026 11:00	2/3/2026 11:00	2/3/2026 11:02	2/3/2026 11:09	0:08:59					Patient Refusal		MERCY 401
716475	2/3/2026 12:27	2/3/2026 12:28	2/3/2026 12:29	2/3/2026 12:33	0:05:04		2/3/2026 12:50	2/3/2026 13:11	2/3/2026 14:47		Hillcrest South Hospital	MERCY 401
716990	2/3/2026 14:47	2/3/2026 14:47	2/3/2026 14:49	2/3/2026 14:57	0:10:06		2/3/2026 15:17	2/3/2026 15:52	2/3/2026 16:16		Hillcrest Medical Center	MERCY 401
717119	2/3/2026 15:23	2/3/2026 15:23	2/3/2026 15:24	2/3/2026 15:29	0:05:39		2/3/2026 15:36	2/3/2026 15:51	2/3/2026 16:16		Hillcrest South Hospital	MERCY 402
717333	2/3/2026 16:50	2/3/2026 16:50	2/3/2026 16:52	2/3/2026 16:56	0:05:32		2/3/2026 17:15	2/3/2026 17:39	2/3/2026 18:10		St Francis South Hospital	MERCY 401
717486	2/3/2026 18:09	2/3/2026 18:10	2/3/2026 18:12	2/3/2026 18:15	0:05:07		2/3/2026 18:37	2/3/2026 18:52	2/3/2026 19:14		St Francis Tulsa Hospital	MERCY 402
718048	2/4/2026 00:56	2/4/2026 00:57	2/4/2026 00:59	2/4/2026 01:03	0:06:43		2/4/2026 01:30	2/4/2026 01:36	2/4/2026 01:52		St Francis Glenpool	MERCY 401
718326	2/4/2026 07:56	2/4/2026 07:56	2/4/2026 07:56	2/4/2026 08:00	0:03:30		2/4/2026 08:08	2/4/2026 08:38	2/4/2026 09:03		St Francis Tulsa Hospital	MERCY 401
718942	2/4/2026 12:28	2/4/2026 12:28	2/4/2026 12:30	2/4/2026 12:37	0:03:16					Patient Refusal		MERCY 401
720032	2/4/2026 20:32	2/4/2026 20:32	2/4/2026 20:34	2/4/2026 20:38	0:05:59					Patient Refusal		MERCY 401
720566	2/5/2026 05:23	2/5/2026 05:23	2/5/2026 05:26	2/5/2026 05:30	0:06:23					Patient Refusal		MERCY 401
720627	2/5/2026 06:44	2/5/2026 06:47	2/5/2026 06:49	2/5/2026 06:53	0:05:50		2/5/2026 07:01	2/5/2026 07:31	2/5/2026 07:46		St Francis Tulsa Hospital	MERCY 401
720652	2/5/2026 07:19	2/5/2026 07:19	2/5/2026 07:22	2/5/2026 07:25	0:05:50		2/5/2026 07:48	2/5/2026 08:23	2/5/2026 08:55		St Francis Tulsa Hospital	MERCY 402
720734	2/5/2026 08:01	2/5/2026 08:06	2/5/2026 08:06	2/5/2026 08:09	0:07:32		2/5/2026 08:23	2/5/2026 08:33	2/5/2026 08:53		St Francis Glenpool	MERCY 401
720734	2/5/2026 08:01	2/5/2026 08:06									St Francis Glenpool	MERCY 401
720861	2/5/2026 09:22	2/5/2026 09:23	2/5/2026 09:24	2/5/2026 09:28	0:05:16		2/5/2026 09:46	2/5/2026 10:09	2/5/2026 10:28		Hillcrest South Hospital	MERCY 401
721173	2/5/2026 11:27	2/5/2026 11:28	2/5/2026 11:30	2/5/2026 11:34	0:05:10		2/5/2026 11:54	2/5/2026 12:11	2/5/2026 12:46		St Francis Tulsa Hospital	MERCY 401
721194	2/5/2026 11:34	2/5/2026 11:35	2/5/2026 11:36	2/5/2026 11:43	0:08:29		2/5/2026 11:58	2/5/2026 12:19	2/5/2026 12:40		St Francis South Hospital	MERCY 402
721455	2/5/2026 13:04	2/5/2026 13:05	2/5/2026 13:05	2/5/2026 13:08	0:03:12						MERCY 401	
721703	2/5/2026 14:03	2/5/2026 14:03	2/5/2026 14:05	2/5/2026 14:05	0:02:30		2/5/2026 14:29	2/5/2026 14:45	2/5/2026 15:13		St Francis Tulsa Hospital	MERCY 401
721999	2/5/2026 15:49	2/5/2026 15:54										

727611	2/8/2026 11:54	2/8/2026 11:54	2/8/2026 11:54	2/8/2026 11:55	0:00:08	2/8/2026 11:55	2/8/2026 12:14	2/8/2026 12:35	St Francis South Hospital	MERCY 401
728382	2/8/2026 21:44	2/8/2026 21:44	2/8/2026 21:45	2/8/2026 21:50	0:06:02			DOA		
728755	2/9/2026 04:34	2/9/2026 04:39	2/9/2026 04:39	2/9/2026 04:43	0:09:49	2/9/2026 05:01	2/9/2026 05:20	2/9/2026 05:45	St Francis Tulsa Hospital	MERCY 401
729116	2/9/2026 09:52	2/9/2026 09:54	2/9/2026 09:54	2/9/2026 09:57	0:04:07	2/9/2026 10:12	2/9/2026 10:35	2/9/2026 10:47	St Francis Tulsa Hospital	MERCY 401
729456	2/9/2026 12:13	2/9/2026 12:13	2/9/2026 12:14	2/9/2026 12:18	0:05:05				Patient Refusal	MERCY 401
729745	2/9/2026 13:51	2/9/2026 13:51	2/9/2026 13:53	2/9/2026 13:58	0:04:55	2/9/2026 13:47	2/9/2026 14:07	2/9/2026 14:17	St Francis South Hospital	MERCY 401
730510	2/9/2026 18:36	2/9/2026 18:36	2/9/2026 18:37	2/9/2026 18:41	0:04:19				Unit on Scene Cancelled	MERCY 401
731271	2/10/2026 07:38	2/10/2026 07:38	2/10/2026 07:41	2/10/2026 07:45	0:07:03				Cancelled by FD/PO	MERCY 401
731313	2/10/2026 08:17	2/10/2026 08:17	2/10/2026 08:18	2/10/2026 08:22	0:04:55	2/10/2026 08:41	2/10/2026 09:13	2/10/2026 09:37	St John Tulsa Medical Center	MERCY 401
731766	2/10/2026 11:52	2/10/2026 11:52	2/10/2026 11:56	2/10/2026 12:00	0:07:58				Patient Refusal	MERCY 401
732079	2/10/2026 13:46	2/10/2026 13:46	2/10/2026 13:48	2/10/2026 13:53	0:06:20	2/10/2026 14:12	2/10/2026 14:40	2/10/2026 15:15	St Francis Tulsa Hospital	MERCY 401
732742	2/10/2026 17:49	2/10/2026 17:49	2/10/2026 17:51	2/10/2026 17:53	0:04:31	2/10/2026 18:15	2/10/2026 18:36	2/10/2026 19:09	St Francis South Hospital	MERCY 401
733120	2/10/2026 22:02	2/10/2026 22:03	2/10/2026 22:05	2/10/2026 22:14	0:10:13	2/10/2026 22:47	2/10/2026 23:14	2/10/2026 23:56	Hillcrest Medical Center	MERCY 401
733554	2/11/2026 07:27	2/11/2026 07:27	2/11/2026 07:30	2/11/2026 07:34	0:06:47	2/11/2026 07:54	2/11/2026 08:33	2/11/2026 08:55	Hillcrest South Hospital	MERCY 401
733719	2/11/2026 08:57	2/11/2026 08:57	2/11/2026 09:01	2/11/2026 09:05	0:05:49	2/11/2026 09:26	2/11/2026 09:49	2/11/2026 10:05	St Francis Tulsa Hospital	MERCY 401
734560	2/11/2026 14:29	2/11/2026 14:29	2/11/2026 14:30	2/11/2026 14:35	0:05:15	2/11/2026 14:50	2/11/2026 15:18	2/11/2026 15:47	St John Tulsa Medical Center	MERCY 401
734825	2/11/2026 15:35	2/11/2026 15:35	2/11/2026 15:37	2/11/2026 15:41	0:04:29	2/11/2026 15:55	2/11/2026 16:21	2/11/2026 16:47	St Francis Tulsa Hospital	MERCY 402
735341	2/11/2026 20:23	2/11/2026 20:23	2/11/2026 20:25	2/11/2026 20:30	0:06:13	2/11/2026 20:39	2/11/2026 20:57	2/11/2026 21:11	St Francis Tulsa Hospital	MERCY 401
735611	2/11/2026 23:34	2/11/2026 23:34	2/11/2026 23:37	2/11/2026 23:43	0:08:16	2/11/2026 23:58	2/12/2026 00:18	2/12/2026 00:36	St Francis Tulsa Hospital	MERCY 401
736225	2/12/2026 09:29	2/12/2026 09:29	2/12/2026 09:31	2/12/2026 09:35	0:05:14	2/12/2026 09:46	2/12/2026 10:12	2/12/2026 10:30	St Francis Tulsa Hospital	MERCY 401
737572	2/12/2026 17:41	2/12/2026 17:41	2/12/2026 17:45	2/12/2026 17:54	0:05:24	2/12/2026 17:54	2/12/2026 18:20	2/12/2026 18:44	St John Tulsa Medical Center	MERCY 401
737842	2/12/2026 20:26	2/12/2026 20:27	2/12/2026 20:27	2/12/2026 20:30	0:02:55	2/12/2026 20:42	2/12/2026 21:03	2/12/2026 21:35	St Francis Tulsa Hospital	MERCY 402
738043	2/12/2026 23:00	2/12/2026 23:00	2/12/2026 23:01	2/12/2026 23:06	0:06:45	2/12/2026 23:24	2/12/2026 23:44	2/13/2026 00:02	St Francis Tulsa Hospital	MERCY 401
738508	2/13/2026 07:14	2/13/2026 07:14	2/13/2026 07:18	2/13/2026 07:21	0:06:10	2/13/2026 07:44	2/13/2026 08:12	2/13/2026 08:32	St Francis Tulsa Hospital	MERCY 401
738563	2/13/2026 07:59	2/13/2026 08:02	2/13/2026 08:05	2/13/2026 08:06	0:06:47	2/13/2026 08:16	2/13/2026 08:34	2/13/2026 08:46	St Francis South Hospital	MERCY 402
739095	2/13/2026 11:50	2/13/2026 11:51	2/13/2026 11:53	2/13/2026 11:57	0:06:25	2/13/2026 12:03	2/13/2026 12:25	2/13/2026 12:58	St Francis South Hospital	MERCY 401
739832	2/13/2026 15:50	2/13/2026 15:50	2/13/2026 16:01	2/13/2026 16:06	0:05:49	2/13/2026 16:22	2/13/2026 16:56	2/13/2026 17:14	St Francis Tulsa Hospital	MERCY 401
740057	2/13/2026 17:50	2/13/2026 17:50	2/13/2026 17:51	2/13/2026 17:58	0:07:51	2/13/2026 18:22	2/13/2026 18:36	2/13/2026 19:07	Hillcrest South Hospital	MERCY 402
740234	2/13/2026 19:54	2/13/2026 19:54	2/13/2026 19:54	2/13/2026 20:01	0:06:52	2/13/2026 20:33	2/13/2026 20:53	2/13/2026 21:57	St Francis Tulsa Hospital	MERCY 401
740810	2/14/2026 04:52	2/14/2026 04:52	2/14/2026 04:56	2/14/2026 05:00	0:07:27	2/14/2026 05:11	2/14/2026 05:33	2/14/2026 05:49	St John Tulsa Medical Center	MERCY 401
740957	2/14/2026 07:50	2/14/2026 07:51	2/14/2026 07:53	2/14/2026 07:57	0:06:14	2/14/2026 08:04	2/14/2026 08:23	2/14/2026 08:57	Hillcrest South Hospital	MERCY 401
741325	2/14/2026 12:13	2/14/2026 12:13	2/14/2026 12:14	2/14/2026 12:19	0:06:23	2/14/2026 12:36	2/14/2026 12:57	2/14/2026 13:14	St Francis Tulsa Hospital	MERCY 401
741675	2/14/2026 15:16	2/14/2026 15:17	2/14/2026 15:18	2/14/2026 15:24	0:06:28				Patient Refusal	MERCY 401
741953	2/14/2026 18:06	2/14/2026 18:06	2/14/2026 18:09	2/14/2026 18:12	0:06:22	2/14/2026 18:22	2/14/2026 18:29	2/14/2026 18:42	St Francis Glenpool	MERCY 401
742573	2/15/2026 02:26	2/15/2026 02:26	2/15/2026 02:30	2/15/2026 02:33	0:07:33	2/15/2026 02:53	2/15/2026 03:11	2/15/2026 03:37	St Francis Tulsa Hospital	MERCY 401
743309	2/15/2026 14:20	2/15/2026 14:20	2/15/2026 14:22	2/15/2026 14:29	0:08:22	2/15/2026 14:57	2/15/2026 15:19	2/15/2026 15:40	St Francis Tulsa Hospital	MERCY 401
744182	2/16/2026 00:42	2/16/2026 00:42	2/16/2026 00:43	2/16/2026 00:48	0:05:59	2/16/2026 01:24	2/16/2026 01:48	2/16/2026 01:59	St Francis Tulsa Hospital	MERCY 401
744751	2/16/2026 10:39	2/16/2026 10:40	2/16/2026 10:40	2/16/2026 10:45	0:05:10	2/16/2026 11:00	2/16/2026 11:23	2/16/2026 11:46	St Francis Tulsa Hospital	MERCY 401
745501	2/16/2026 15:21	2/16/2026 15:21	2/16/2026 15:21	2/16/2026 15:24	0:03:18				Patient Refusal	MERCY 401
745867	2/16/2026 17:55	2/16/2026 17:56	2/16/2026 17:55	2/16/2026 18:00	0:04:34	2/16/2026 18:05	2/16/2026 18:31	2/16/2026 18:45	St Francis Tulsa Hospital	MERCY 401
746056	2/16/2026 19:49	2/16/2026 19:50	2/16/2026 19:50	2/16/2026 19:52	0:02:45				False Call	MERCY 401
746196	2/16/2026 21:40	2/16/2026 21:40	2/16/2026 21:42	2/16/2026 21:48	0:06:04	2/16/2026 22:09	2/16/2026 22:11	2/16/2026 22:19	St Francis Glenpool	MERCY 401
746653	2/17/2026 05:13	2/17/2026 05:13	2/17/2026 05:15	2/17/2026 05:20	0:06:45				Unit on Scene Cancelled	MERCY 401
746740	2/17/2026 07:02	2/17/2026 07:02	2/17/2026 07:04	2/17/2026 07:07	0:04:44				Patient Refusal	MERCY 401
746577	2/17/2026 21:10	2/17/2026 21:10	2/17/2026 21:14	2/17/2026 21:17	0:06:18	2/17/2026 21:39	2/17/2026 22:04	2/17/2026 22:25	St Francis Tulsa Hospital	MERCY 401
749322	2/18/2026 07:10	2/18/2026 07:11	2/18/2026 07:14	2/18/2026 07:16	0:05:54				Patient Refusal	MERCY 401
749527	2/18/2026 11:02	2/18/2026 11:02	2/18/2026 11:09	2/18/2026 11:09	0:06:14	2/18/2026 11:24	2/18/2026 11:49	2/18/2026 12:15	St Francis Tulsa Hospital	MERCY 401
749659	2/18/2026 11:55	2/18/2026 11:54	2/18/2026 11:55	2/18/2026 11:59	0:05:28	2/18/2026 12:24	2/18/2026 12:52	2/18/2026 13:15	Hillcrest Medical Center	MERCY 402
749967	2/18/2026 13:29	2/18/2026 13:29	2/18/2026 13:30	2/18/2026 13:37	0:07:46	2/18/2026 14:06	2/18/2026 14:34	2/18/2026 14:49	St Francis Tulsa Hospital	MERCY 401
750461	2/18/2026 15:56	2/18/2026 15:56	2/18/2026 15:58	2/18/2026 16:04	0:07:35	2/18/2026 16:26	2/18/2026 17:17	2/18/2026 17:18	St Francis South Hospital	MERCY 401
751526	2/19/2026 07:53	2/19/2026 07:53	2/19/2026 07:57	2/19/2026 08:02	0:09:04	2/19/2026 08:15	2/19/2026 08:58	2/19/2026 09:28	St John Tulsa Medical Center	MERCY 401
751714	2/19/2026 09:43	2/19/2026 09:44	2/19/2026 09:45	2/19/2026 09:50	0:05:51	2/19/2026 10:03	2/19/2026 10:25	2/19/2026 10:44	Hillcrest South Hospital	MERCY 402
751841	2/19/2026 10:39	2/19/2026 10:39	2/19/2026 10:40	2/19/2026 10:46	0:07:15	2/19/2026 10:58	2/19/2026 11:26	2/19/2026 11:45	St Francis Tulsa Hospital	MERCY 401
752043	2/19/2026 11:50	2/19/2026 11:51	2/19/2026 11:56	2/19/2026 11:59	0:07:51				Unit on Scene Cancelled	MERCY 402
752488	2/19/2026 14:05	2/19/2026 14:05	2/19/2026 14:07	2/19/2026 14:11	0:05:53	2/19/2026 14:18	2/19/2026 14:28	2/19/2026 14:42	St Francis Glenpool	MERCY 401
752888	2/19/2026 16:16	2/19/2026 16:16	2/19/2026 16:22	2/19/2026 16:29	0:12:15				Patient Refusal	MERCY 401
753403	2/19/2026 21:17	2/19/2026 21:17	2/19/2026 21:18	2/19/2026 21:17	0:00:54	2/19/2026 21:32	2/19/2026 21:47	2/19/2026 22:25	St Francis Tulsa Hospital	MERCY 401
753598	2/19/2026 23:20	2/19/2026 23:20	2/19/2026 23:21	2/19/2026 23:26	0:06:21				Patient Refusal	MERCY 401
753603	2/19/2026 23:22	2/19/2026 23:24	2/19/2026 23:24	2/19/2026 23:32	0:08:11	2/19/2026 23:41	2/20/2026 00:01	2/20/2026 00:40	St John Tulsa Medical Center	MERCY 402
753826	2/20/2026 04:09	2/20/2026 04:10	2/20/2026 04:15	2/20/2026 04:18	0:08:01	2/20/2026 04:33	2/20/2026 04:54	2/20/2026 05:18	St Francis Tulsa Hospital	MERCY 401
754253	2/20/2026 10:06	2/20/2026 10:07	2/20/2026 10:08	2/20/2026 10:12	0:05:52	2/20/2026 10:35	2/20/2026 10:54	2/20/2026 11:13	St Francis Tulsa Hospital	MERCY 401
754572	2/20/2026 11:54	2/20/2026 11:52	2/20/2026 11:54	2/20/2026 12:10	0:04:56	2/20/2026 12:30	2/20/2026 12:37	2/20/2026 14:46	St Francis Tulsa Hospital	MERCY 401
754653	2/20/2026 12:24	2/20/2026 12:24	2/20/2026 12:27	2/20/2026 12:32	0:07:24	2/20/2026 12:45	2/20/2026 12:59	2/20/2026 13:26	Hillcrest South Hospital	MERCY 402
755177	2/20/2026 14:45	2/20/2026 14:46	2/20/2026 14:49	2/20/2026 14:53	0:06:56	2/20/2026 14:58	2/20/2026 15:18	2/20/2026 15:37	St Francis South Hospital	MERCY 401
756283	2/21/2026 01:30	2/21/2026 01:33	2/21/2026 01:37	2/21/2026 01:40	0:07:18	2/21/2026 01:53	2/21/2026 02:11	2/21/2026 02:26	St Francis South Hospital	MERCY 401
757220	2/21/2026 15:00	2/21/2026 15:00	2/21/2026 15:03	2/21/2026 15:07	0:06:33	2/21/2026 15:33	2/21/2026 15:53	2/21/2026 16:33	St Francis Tulsa Hospital	MERCY 401
757907	2/21/2026 22:50	2/21/2026 22:51	2/21/2026 22:53	2/21/2026 22:56	0:05:57				Patient Refusal	MERCY 401
757948	2/21/2026 23:28	2/21/2026 23:28	2/21/2026 23:32	2/21/2026 23:33	0:05:37				DOA	MERCY 401
758148	2/22/2026 02:59	2/22/2026 03:02	2/22/2026 03:02	2/22/2026 03:03	0:11:32				Cancelled by FD/PO	MERCY 401
758864	2/22/2026 14:55	2/22/2026 14:55	2/22/2026 15:00	2/22/2026 15:00	0:05:04	2/22/2026 15:10	2/22/2026 15:31	2/22/2026 15:46	St Francis South Hospital	MERCY 401
759115	2/22/2026 17:32	2/22/2026 17:32	2							

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



Dir 1 251 4

9017X0C.004 BNCF:0008717



24-Hour
 Automated
 Account Information

1-877-602-2262

2 *0008717
 GLENPOOL AREA EMERGENCY MEDICAL
 SERVICE DISTRICT
 12205 S YUKON AVE
 GLENPOOL OK 74033-6635

PAGE 1

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 1/30/26



- Cell Phone Protection*
- 24/7 Roadside Assistance
- Shopping, travel, and entertainment discounts
- \$20,000 AD&D Insurance
- Cash-back on everyday purchases
- And more for \$5 a month!

\$100 minimum opening deposit. Complete disclosures available at any BancFirst office.

*Must pay phone bill through your Loyalty Checking account.



ACCOUNT ANALYSIS

Beginning Balance	1/01/26	193,993.37
Deposits / Misc Credits	1	350,302.85
Withdrawals / Misc Debits	4	32,883.34
** Ending Balance	1/31/26	511,412.88 **

Service Charge	.00
Enclosures	4

DEPOSITS

Date	Deposits	Withdrawals	Activity Description
1/15	350,302.85		TULSA COUNTY/REMIT

CHECKS

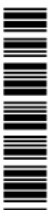
* indicates skip in check numbers

Date	Check No.	Amount	Date	Check No.	Amount	Date	Check No.	Amount
1/14	2291	208.33	1/09	2294	17,466.68	1/14	2295	208.33
1/20	2293*	15,000.00						

DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
1/09	176,526.69	1/15	526,412.88	1/20	511,412.88
1/14	176,110.03				

8002-00000



Statement Date: 1/30/26

PAGE 2

DO NOT ACCEPT UNLESS THIS CHECK IS PRINTED WITH A COLOR BACKGROUND, CONTAINS A VOID PANTOGRAPH, MICROPRINTING FACE AND BACK, UV FIBERS AND A WATERMARK ON THE REVERSE SIDE.

GLENPOOL AREA EMERGENCY 01/93 BancFirst 002291
MEDICAL SERVICE DISTRICT Glenpool, Oklahoma 39-363/1000
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635

PAY --- TWO HUNDRED EIGHT & 33/100 DOLLARS --- DATE 12/04/2025 CHECK AMOUNT \$*****208.33

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

BY: *[Signature]*
 AUTHORIZED SIGNATURES

*00 2291 * 103003632 *

Number: 2291 Date: 1/14/2026 Amount: \$208.33

DO NOT ACCEPT UNLESS THIS CHECK IS PRINTED WITH A COLOR BACKGROUND, CONTAINS A VOID PANTOGRAPH, MICROPRINTING FACE AND BACK, UV FIBERS AND A WATERMARK ON THE REVERSE SIDE.

GLENPOOL AREA EMERGENCY 01/93 BancFirst 002293
MEDICAL SERVICE DISTRICT Glenpool, Oklahoma 39-363/1000
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635

PAY --- FIFTEEN THOUSAND & 00/100 DOLLARS --- DATE 01/05/2026 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

BY: *[Signature]*
 AUTHORIZED SIGNATURES

*00 2293 * 103003632 *

Number: 2293 Date: 1/20/2026 Amount: \$15000.00

DO NOT ACCEPT UNLESS THIS CHECK IS PRINTED WITH A COLOR BACKGROUND, CONTAINS A VOID PANTOGRAPH, MICROPRINTING FACE AND BACK, UV FIBERS AND A WATERMARK ON THE REVERSE SIDE.

GLENPOOL AREA EMERGENCY 01/93 BancFirst 002294
MEDICAL SERVICE DISTRICT Glenpool, Oklahoma 39-363/1000
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635

PAY --- SEVENTEEN THOUSAND FOUR HUNDRED SIXTY SIX & 00/100 DOLLARS CHECK AMOUNT \$*****17,466.68

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

BY: *[Signature]*
 AUTHORIZED SIGNATURES

*00 2294 * 103003632 *

Number: 2294 Date: 1/9/2026 Amount: \$17466.68

DO NOT ACCEPT UNLESS THIS CHECK IS PRINTED WITH A COLOR BACKGROUND, CONTAINS A VOID PANTOGRAPH, MICROPRINTING FACE AND BACK, UV FIBERS AND A WATERMARK ON THE REVERSE SIDE.

GLENPOOL AREA EMERGENCY 01/93 BancFirst 002295
MEDICAL SERVICE DISTRICT Glenpool, Oklahoma 39-363/1000
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635

PAY TWO HUNDRED EIGHT & 33/100 DOLLARS DATE 01/03/2026 CHECK AMOUNT \$*****208.33

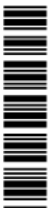
TO THE ORDER OF ** JOSHUA M. BRANNON **
 12205 S YUKON AVE.
 GLENPOOL, OK 74033

BY: *[Signature]*
 AUTHORIZED SIGNATURES

*00 2295 * 103003632 *

Number: 2295 Date: 1/14/2026 Amount: \$208.33

4022-00000



PERIOD: 1/01/2026 - 1/31/2026

ACCOUNT: 31-1001 GEMS CASH IN BANK

RECONCILIATION SUMMARY

BEGINNING STATEMENT BALANCE:	193,993.37	GL ACCOUNT BALANCE:	511,204.55
DEPOSITS:	+ 350,302.85	OUTSTANDING DEPOSITS:	- 0.00
WITHDRAWALS:	+ 32,883.34CR	OUTSTANDING CHECKS:	- 208.33CR
ADJUSTMENTS:	+ <u>0.00</u>	ADJUSTMENTS:	+ <u>0.00</u>
ENDING STATEMENT BALANCE:	511,412.88	ADJUSTED GL ACCOUNT BALANCE:	511,412.88

STATEMENT BALANCE: 511,412.88
 BANK DIFFERENCE: 0.00
 G/L DIFFERENCE: 0.00

CLEARED DEPOSITS:

1/15/2026	JULY GEMS TAX DEP FROM TC	<u>350,302.85</u>
TOTAL CLEARED DEPOSITS:		350,302.85

=====

CLEARED CHECKS:

12/04/2025	002291	JOSHUA M. BRANNON	208.33CR
1/05/2026	002293	CENTURION HEALTH SYSTEMS, DBA M	15,000.00CR
1/05/2026	002294	CITY OF GLENPOOL - GEMS	17,466.68CR
1/05/2026	002295	JOSHUA M. BRANNON	<u>208.33CR</u>
TOTAL CLEARED CHECKS:			32,883.34CR

=====

CLEARED OTHER:

No Items.

31 -GEMS

ACCOUNT #	ACCOUNT DESCRIPTION	BALANCE	
<u>ASSETS</u>			
=====			
31-1001	GEMS CASH IN BANK	511,204.55	
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>539,638.61</u>
TOTAL ASSETS			539,638.61
=====			
<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>383,003.17</u>	
	TOTAL BEGINNING EQUITY	383,003.17	
TOTAL REVENUE		374,640.48	
TOTAL EXPENSES		<u>218,005.04</u>	
TOTAL REVENUE OVER/(UNDER) EXPENSES		156,635.44	
TOTAL EQUITY & REV. OVER/(UNDER) EXP.			<u>539,638.61</u>
TOTAL LIABILITIES, EQUITY & REV.OVER/(UNDER) EXP.			539,638.61
=====			

CITY OF GLENPOOL
 PRIOR YEAR ENCUMBRANCE FINANCIAL (UNAUDITED)
 AS OF: JANUARY 31ST, 2026

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
<u>REVENUE SUMMARY</u>							
NON-DEPARTMENTAL	<u>437,896.00</u>	<u>350,302.85</u>	<u>0.00</u>	<u>374,640.48</u>	<u>0.00</u>	<u>63,255.52</u>	<u>85.55</u>
TOTAL REVENUES	437,896.00	350,302.85	0.00	374,640.48	0.00	63,255.52	85.55
	=====	=====	=====	=====	=====	=====	=====
<u>EXPENDITURE SUMMARY</u>							
GEMS	<u>437,896.00</u>	<u>0.00</u>	<u>0.00</u>	<u>218,005.04</u>	<u>32,883.34</u>	<u>187,007.62</u>	<u>57.29</u>
TOTAL EXPENDITURES	437,896.00	0.00	0.00	218,005.04	32,883.34	187,007.62	57.29
	=====	=====	=====	=====	=====	=====	=====
REVENUE OVER/ (UNDER) EXPENDITURES	0.00	350,302.85	0.00	156,635.44	(32,883.34)	0.00	0.00

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	<u>417,157.00</u>	<u>350,302.85</u>	<u>0.00</u>	<u>374,640.48</u>	<u>0.00</u>	<u>42,516.52</u>	<u>89.81</u>
TOTAL TAXES	417,157.00	350,302.85	0.00	374,640.48	0.00	42,516.52	89.81
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	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
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	<u>20,739.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>20,739.00</u>	<u>0.00</u>
TOTAL OTHER FINANCING SOURCES	20,739.00	0.00	0.00	0.00	0.00	20,739.00	0.00
TOTAL NON-DEPARTMENTAL	437,896.00	350,302.85	0.00	374,640.48	0.00	63,255.52	85.55

** TOTAL REVENUES **	<u>437,896.00</u>	<u>350,302.85</u>	<u>0.00</u>	<u>374,640.48</u>	<u>0.00</u>	<u>63,255.52</u>	<u>85.55</u>
=====							

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
<u>GEMS</u>							
=====							
<u>PERSONAL SERVICES</u>							
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
<u>SUPPLIES</u>							
31-6-01-6202 OPERATING SUPPLIES	5,500.00	0.00	0.00	3,065.58	0.00	2,434.42	55.74
31-6-01-6206 MINOR EQUIPMENT	2,500.00	0.00	0.00	0.00	0.00	2,500.00	0.00
TOTAL SUPPLIES	8,000.00	0.00	0.00	3,065.58	0.00	4,934.42	38.32
<u>OTHER CHARGES & SERVICES</u>							
31-6-01-6210 AMBULANCE CONTRACT	180,000.00	0.00	0.00	105,000.00	15,000.00	60,000.00	66.67
31-6-01-6225 FIRST RESPONDER/ADMIN FEES	203,678.00	0.00	0.00	96,901.20	17,466.68	89,310.12	56.15
31-6-01-6235 CONTRACT SERVICES	13,800.00	0.00	0.00	7,040.66	416.66	6,342.68	54.04
31-6-01-6236 AUDIT FEES	25,918.00	0.00	0.00	5,997.60	0.00	19,920.40	23.14
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	423,396.00	0.00	0.00	214,939.46	32,883.34	175,573.20	58.53
<u>TRAVEL & TRAINING</u>							
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
<u>MISCELLANEOUS</u>							
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
<u>CAPITAL EXPENDITURES</u>							
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
<u>OTHER FINANCING USES</u>							
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
<hr/>							
TOTAL GEMS	437,896.00	0.00	0.00	218,005.04	32,883.34	187,007.62	57.29
<hr/>							
TOTAL EXPENDITURES	437,896.00	0.00	0.00	218,005.04	32,883.34	187,007.62	57.29
=====							
REVENUE OVER/(UNDER) EXPENDITURES	0.00	350,302.85	0.00	156,635.44	(32,883.34)	(123,752.10)	0.00

Month	FY2026	FY2025	FY2024	FY2023	FY2022	FY2021	FY2020
July	0.3%	0.2%	0.1%	0.3%	0.4%	0.5%	0.3%
August	0.6%	0.5%	0.3%	0.4%	0.6%	0.6%	0.7%
September	0.7%	0.8%	0.6%	0.5%	0.8%	0.8%	0.7%
October	0.8%	1.0%	1.0%	1.4%	1.2%	1.0%	1.1%
November	0.9%	1.2%	1.3%	1.5%	1.3%	1.2%	1.2%
December	5.6%	7.0%	6.1%	5.4%	4.6%	5.9%	4.6%
January	85.6%	91.3%	90.0%	91.3%	85.8%	80.3%	80.8%
February		97.5%	98.2%	100.7%	92.1%	90.7%	85.6%
March		98.7%	100.2%	103.2%	94.0%	92.4%	87.6%
April		108.4%	108.6%	110.9%	101.8%	101.7%	93.3%
May		112.1%	112.7%	114.2%	104.9%	105.2%	97.9%
June		112.7%	113.7%	115.0%	105.3%	105.7%	99.1%

As of January 31, 2026 GEMS received 85.6% of tax revenue originally budgeted.
 In other words, \$374,640.48 has been received of the \$437,896.00 tax revenue originally budgeted.



GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit:
Date:

- 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:
 - 1 - Thomas Tube Holder Pink Exp. Date:
 - 1 - Airtraq Blade Grey Exp. Date:

- O2 LEFT SIDE POCKET**
- 1-O2 Cylinder psi
 - 2-Adult NRB
 - 2-Adult NC
 - 1-Adult BVM

- INSIDE POCKET**
- 1-Blood Glucose Kit/Test Strips Exp. Date:
 - 1-Tube Glucose 31g Exp. Date:
 - 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:	02 February 2026	Exp. Date:	29 May 2028
2-18g IV	Exp. Date:	20 October 2026	Exp. Date:	20 October 2027
2-20g IV	Exp. Date:	26 August 2027	Exp. Date:	02 May 2027
2-22g IV	Exp. Date:	11 March 2027	Exp. Date:	15 April 2027
2-24g IV	Exp. Date:	25 October 2027	Exp. Date:	25 October 2027
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		<input checked="" type="checkbox"/>		
2-EZ Stabilizers	Exp. Date:	19 March 2029	Exp. Date:	02 May 2027
2-45mm 15g IO Needle Set	Exp. Date:	30 November 2027	Exp. Date:	31 December 2026
2-25mm 15g IO Needle Set	Exp. Date:	31 March 2027	Exp. Date:	31 July 2028
1-IV Bag	Exp. Date:	31 March 2028		
1 Pressure Bag		<input checked="" type="checkbox"/>		

AIRWAY COMPARTMENT

1-2.5 ET Tube	Exp. Date:	01 December 2027	1-7.0 ET Tube	Exp. Date:	01 January 2027
1-3.0 ET Tube	Exp. Date:	17 December 2026	1-7.5 ET Tube	Exp. Date:	17 December 2026
1-3.5 ET Tube	Exp. Date:	07 May 2026	1-8.0 ET Tube	Exp. Date:	21 July 2027
1-4.0 ET Tube	Exp. Date:	14 April 2027	1-8.5 ET Tube	Exp. Date:	15 October 2026
1-4.5 ET Tube	Exp. Date:	21 July 2027	1-9.0 ET Tube	Exp. Date:	20 August 2026
1-5.0 ET Tube	Exp. Date:	28 May 2026	1-OPA Kit		<input checked="" type="checkbox"/>
1-5.5 ET Tube	Exp. Date:	16 July 2026	K-Y Lube Gel	Exp. Date:	31 July 2028
1-6.0 ET Tube	Exp. Date:	20 August 2026			
1-6.5 ET Tube	Exp. Date:	06 August 2026			

AIRWAY COMPARTMENT CONT.

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

Size 8.7	Exp. Date:	28 November 2027	4 KAD	
Size 9.3	Exp. Date:	07 December 2026	Green	Exp. Date: 01 October 2026
Size 10	Exp. Date:	28 April 2027	Purple	Exp. Date:
Size 10.7	Exp. Date:	29 March 2027	Yellow	Exp. Date: 01 November 2027
Size 11.3	Exp. Date:	31 March 2027	Red	Exp. Date:

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	31 December 2026	
1-50% Dextrose	Exp. Date:	03 March 2027	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	30 September 2026	Exp. Date: 30 September 2026
2 - 18g Filter Needles	Exp. Date:	14 June 2028	Exp. Date: 25 November 2028
2 - 23g Eclipse Needle	Exp. Date:	31 March 2026	Exp. Date: 31 March 2026
2 - 1mL Syringe	Exp. Date:	31 December 2026	Exp. Date: 31 December 2026
2 - 4x4 Gauze	<input checked="" type="checkbox"/>		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	30 March 2026	Exp. Date: 30 September 2026
1 - 2% Lidocaine Hcl	Exp. Date:	28 February 2026	
1 - Nebulizer Kit	<input checked="" type="checkbox"/>		
3 - Albuterol 2.5mg	Exp:	30 September 2027	Exp: 30 September 2027 Exp: 30 September 2027
1 - Levalbuterol 1.25	Exp. Date:	30 March 2026	
1 - Levalbuterol 0.31	Exp. Date:		
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	31 July 2026	Exp. Date: 31 July 2026
1 - Low Dose Aspirin (81 mg)	Exp. Date:	31 March 2026	
1 - Roll Med Tape	<input checked="" type="checkbox"/>		

LIFEPAK MONITOR

Child/ Adult AED Pads Exp. Date:

Capno

PEDI Pulse OX Exp. Date:

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: Location: DATE

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. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Two fully charged batteries | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Service indicator | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> 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 | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Auxiliary power LED on device is illuminated | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Battery charging LED on device is illuminating or flashing. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> 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. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Connect therapy cable to defibrillator and test load. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Select LEAD then PADDLES | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Select 200 JOULES and press CHARGE. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Press SHOCK button | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Confirm ENERGY DELIVERED message appears. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> 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: | <input type="text" value="838"/> | New Seal: | <input type="text" value="001"/> |
| Exp.: | <input type="text" value="31 March 2027"/> | Exp.: | <input type="text" value="31 March 2028"/> |
- 2 IV bags
- 2 IV/IO drop admin sets
-

Center Pocket

- | | | | |
|-------|--|-----------|--|
| Seal: | <input type="text" value="828"/> | New Seal: | <input type="text" value="002"/> |
| Exp.: | <input type="text" value="09 October 2026"/> | Exp.: | <input type="text" value="09 October 2026"/> |
- 2-Asherman chest seals
- 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:

850

New Seal:

003

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

Bottom Left Pocket

Seal:

856

New Seal:

004

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

Bop Right Pocket: (Ped/Infant)

Seal:

871

New Seal:

005

- 1- Ped/Infant NRB
- 1- Ped NRB mask
- 2- Infant NRB mask
- 1- Pedi BVM

Exp.:

06 July 2028

GDF STAFF





GLENPOOL FIRE DEPARTMENT MED BAG CHECKLIST

Unit:	Rescue 1
Date:	20 February 2026

- 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: 24 February 2028
 - 1 - Thomas Tube Holder Pink Exp. Date: 13 September 2026
 - 1 - Airtraq Blade Grey Exp. Date: 31 March 2027

- O2 LEFT SIDE POCKET**
- 1-O2 Cylinder psi 1200
 - 2-Adult NRB
 - 2-Adult NC
 - 1-Adult BVM

- INSIDE POCKET**
- 1-Blood Glucose Kit/Test Strips Exp. Date: 02 February 2027
 - 1-Tube Glucose 31g Exp. Date: 30 April 2028
 - Lancettes
 - Adhesive Bandages
 - i-Gel 3
 - Alcohol Swabs
 - 1-Tactical Tourniquet
 - i-Gel 4
 - 1-Thermometer
 - 1-Samsplint
 - i-Gel 5

- 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:	29 May 2028	Exp. Date:	29 May 2028
2-18g IV	Exp. Date:	24 May 2027	Exp. Date:	24 May 2027
2-20g IV	Exp. Date:	29 August 2027	Exp. Date:	29 August 2027
2-22g IV	Exp. Date:	15 April 2027	Exp. Date:	15 April 2027
2-24g IV	Exp. Date:	25 October 2027	Exp. Date:	25 October 2027
4-Saline Flushes	{ Exp. Date:	15 April 2027	Exp. Date:	05 June 2027
	{ Exp. Date:	25 April 2026	Exp. Date:	01 April 2026

2-IV Start Kits

2-EZ Stabilizers	Exp. Date:	02 May 2027	Exp. Date:	21 September 2026
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2-45mm 15g IO Needle Set	Exp. Date:	30 June 2026	Exp. Date:	30 June 2026
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2-25mm 15g IO Needle Set	Exp. Date:	31 May 2026	Exp. Date:	30 September 2026
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1-IV Bag	Exp. Date:	30 June 2027
----------	------------	--------------

1 Pressure Bag

AIRWAY COMPARTMENT

1-2.5 ET Tube	Exp. Date:	16 July 2026	1-7.0 ET Tube	Exp. Date:	02 April 2026
1-3.0 ET Tube	Exp. Date:	28 May 2026	1-7.5 ET Tube	Exp. Date:	15 October 2026
1-3.5 ET Tube	Exp. Date:	21 July 2027	1-8.0 ET Tube	Exp. Date:	06 August 2026
1-4.0 ET Tube	Exp. Date:	14 April 2027	1-8.5 ET Tube	Exp. Date:	15 October 2026
1-4.5 ET Tube	Exp. Date:	14 July 2027	1-9.0 ET Tube	Exp. Date:	20 August 2026
1-5.0 ET Tube	Exp. Date:	25 February 2027	1-OPA Kit	<input checked="" type="checkbox"/>	
1-5.5 ET Tube	Exp. Date:	21 July 2027	K-Y Lube Gel	Exp. Date:	31 July 2028
1-6.0 ET Tube	Exp. Date:	20 August 2026			
1-6.5 ET Tube	Exp. Date:	28 May 2026			

AIRWAY COMPARTMENT CONT.

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

Size 8.7	Exp. Date:	31 July 2028	4 KAD		
Size 9.3	Exp. Date:	08 March 2028	Green	Exp. Date:	
Size 10	Exp. Date:	15 July 2029	Purple	Exp. Date:	
Size 10.7	Exp. Date:	25 July 2026	Yellow	Exp. Date:	01 July 2026
Size 11.3	Exp. Date:	06 May 2027	Red	Exp. Date:	01 October 2027

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	31 December 2026	
1-10% Dextrose	Exp. Date:	28 February 2026	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	28 February 2026	Exp. Date: 28 February 2026
2 - 18g Filter Needles	Exp. Date:	25 November 2028	Exp. Date: 25 November 2028
2 - 23g Eclipse Needle	Exp. Date:		Exp. Date:
2- 21g Precision Glide Needle	Exp. Date:	31 March 2027	Exp. Date: 31 March 2026
2 - 18/20g Hypo. Needle	Exp. Date:	01 March 2026	Exp. Date: 01 March 2027
2 - 1mL Syringe	Exp. Date:	31 December 2026	Exp. Date: 31 December 2026
2 - 4x4 Gauze	<input checked="" type="checkbox"/>		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	31 March 2026	Exp. Date: 31 March 2026
1 - 2% Lidocane Hcl	Exp. Date:	28 February 2026	
1 - Nebulizer Kit	<input checked="" type="checkbox"/>		
3 - Albuterol 2.5mg	Exp:	30 September	Exp: 30 September
1 - Levalbuterol 1.25mg	Exp. Date:	31 March 2026	
1 - Levalbuterol 0.31mg	Exp. Date:	31 March 2026	
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	31 July 2026	Exp. Date: 31 July 2026
1 - Low Dose Aspirin (81 mg)	Exp. Date:	30 September 2026	
1 - Roll Med Tape	<input checked="" type="checkbox"/>		

LIFEPAK MONITOR

Pedi AED Pads	Exp. Date:	22 March 2026	NC Capno	<input checked="" type="checkbox"/>
Child/ Adult AED Pads	Exp. Date:	18 March 2027	BVM Capno	<input checked="" type="checkbox"/>
PEDI Pulse OX	Exp. Date:	01 October 2026	NC Capno w/ O2	<input checked="" type="checkbox"/>
Electrodes	Exp. Date:	05 October 2026	Razor	<input checked="" type="checkbox"/>

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: Location: DATE

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. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Two fully charged batteries | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Service indicator | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> 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 | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Auxiliary power LED on device is illuminated | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Battery charging LED on device is illuminating or flashing. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> 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. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Connect therapy cable to defibrillator and test load. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Select LEAD then PADDLES | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Select 200 JOULES and press CHARGE. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Press SHOCK button | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Confirm ENERGY DELIVERED message appears. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> 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

2 IV/IO drop admin sets

Seal:

007

New Seal:

006

Exp.:

31 March 2027

Exp.:

31 March 2028



Center Pocket

2-Asherman chest seals

2- 4X4 Gauze

1-Roll white duct tape

1-Tactical Tourniquet

3- 5X9 Gauze

2-Rolls Coban

2- Ice packs

2- Stretch Gauze

1- OB Kit

Seal:

811

New Seal:

008

Exp.:

31 October 2026

Exp.:

31 October 2026



Exp.:

30 November 2028

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:

New Seal:

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

Bottom Left Pocket

Seal:

New Seal:

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

Top Right Pocket: (Ped/Infant)

Seal:

New Seal:

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

Apparatus EMS Compartment

Air Splint Bag

- #2024
- #2010
- #2014
- #2215
- #2222

- Extra straps
- Air pump

C-collar Bag

- 3- Adult
- 3- Pediatric
- 3- Infant
- 3- Head Blocks

-
- 1- Mega Mover
 - 1- Spare O2 bottle

Suction Device

- 1- Yankauer Suction Set
- 1- Canisterr

GFD STAFF



GLENPOOL AREA EMERGENCY MEDICAL SERVICE
DISTRICT
 MEETING MINUTES
 FEBRUARY 2, 2026

COUNCIL PRESENT:	Tim Fox, Jaci Triplett-Lund, Joyce Calvert, Chris Brobst, Shayne Buchanan
COUNCIL ABSENT:	
STAFF PRESENT:	David Tillotson, LeaAnn Reed, David Agbetunsin, Lesli Smith, Josh Brannon.
STAFF ABSENT:	

- A) **Call to Order - Joyce G. Calvert, Mayor**
 Chair Calvert called the meeting to order at 7:22 P.M.

- B) **Roll Call, Declaration of a Quorum - Lesli Smith, City Clerk; Joyce G. Calvert, Mayor**
 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**
 - 1) EMS Report - Brian Cook, Director of Operations, Mercy Regional EMS
 Director Cook reported for the dates of December 30, 2025–January 26, 2026.
 He reported that they logged 137 calls for service during this period while maintaining a 98% response time compliance.
 89 patients were treated and transported.
 34 patients refused transport.
 8 canceled prior to arrival.
 2 Mutual aid received.
 2DOA
 2 false calls

- D) **District Administrator Report**
 - 1) District Administrator Report
 There was no official Administrator report.

- 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.**

- 1) To approve the minutes from the December 1, 2025, and the January 5, 2026, meetings.
- 2) To approve the purchase orders receiving report and payment claims as of 1/28/2026 totaling \$32,883.34.

Moved by Jaci Triplett-Lund, seconded by Joyce Calvert

For	Against
Tim Fox, Jaci Triplett-Lund, Joyce Calvert, Chris Brobst, Shayne Buchanan	None
5	0

Abstained	Absent
None	
0	

To approve the consent agenda.

CARRIED.

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

No items were removed from the consent agenda.

I) **Scheduled Business**

No items on the Scheduled Business section. No discussions or votes taken.

J) **Adjournment**

The meeting was adjourned at 7:25 P.M.

To: Honorable Chair and GEMS District Board Members

From: Josh Brannon, Finance Director

Meeting Date: March 2, 2026

Department/Office: Finance

Item Name: To approve the purchase orders receiving report and payment claims as of 2/25/2026 totaling \$32,186.38.

Summary:

To approve the purchase orders receiving report and payment claims as of 2/25/2026 totaling \$32,186.38.

Recommended Action:

Staff recommends a motion to accept the PO Receipt Register report dated 2/25/2026 and approve the following payments:

PO #	Account	Vendor	Description	Inv#	Amount
26-23502	31-6-01-6210	Centurion Health Systems	Ambulance Service Mar 2026	3473	\$15,000.00
26-23503	31-6-01-6225	City of Glenpool	1st Responder Feb 2025	FEB2026	\$16,769.72
26-23504	31-6-01-6235	Lesli Smith	District Clerk	LS022026	\$208.33
26-23505	31-6-01-6235	Joshua Brannon	District Treasurer	JB022026	\$208.33
				Total	\$32,186.38

Budget:

Attachments:

1. GEMS Packet 03-02-2026

P O RECEIPT REGISTER
AUDIT REPORT

VENDOR NAME	INVOICE	POST DATE	BANK	INVOICE AMOUNT	VENDOR TOTAL
31-000004 CENTURION HEALTH SYSTEMS, DBA M	3473	2/28/2026	31	15,000.00	15,000.00
31-000005 CITY OF GLENPOOL - GEMS	12320262192026	2/28/2026	31	16,769.72	16,769.72
31-000033 JOSHUA M. BRANNON	JB022026	2/28/2026	31	208.33	208.33
31-000032 LESLI SMITH	LS022026	2/28/2026	31	208.33	208.33
***TOTALS**				32,186.38	32,186.38

APPROVED

BY

Joyce G. Calvert, March 2, 2026

FUND: 31 - GEMS

SUMMARY REPORT

PURCHASE ORDER	DESCRIPTION	VENDOR #	VENDOR NAME	DATE INVOICE	AMOUNT
DEPARTMENT: 01 - NON-DEPARTMENTAL					
26-23502	MERCY REGIONAL MARCH 2026	31-000004	CENTURION HEALTH SYSTEMS, DBA	2/2026 3473	15,000.00
26-23503	!ST RESPONDER JAN 2026	31-000005	CITY OF GLENPOOL - GEMS	2/2026 12320262192026	16,769.72
26-23504	L. SMITH GEMS SEC FEB 202	31-000032	LESLI SMITH	2/2026 LS022026	208.33
26-23505	J. BRANNON GEMS TREA FEB	31-000033	JOSHUA M. BRANNON	2/2026 JB022026	208.33
DEPARTMENT TOTAL:					32,186.38
FUND TOTAL:					32,186.38
GRAND TOTAL:					32,186.38

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 # 26-23502

02/25/2026

ISSUED TO: VENDOR #: 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.

02/25/2026

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. 02/25/2026

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	MERCY REGIONAL MARCH 2026 INV NO. 3473 MERCY REGIONAL MARCH 2026		00041687	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 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# 00041687

Mercy Regional Oklahoma

P.O. Box 2398
Owasso, OK 74055

Invoice

Date	Invoice #
2/11/2026	3473

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 2026	15,000.00	15,000.00

Phone #	Fax #
9186095829	918-609-5799

Total	\$15,000.00
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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 # 26-23503 02/25/2026

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.

02/25/2026

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. 02/25/2026

ENCUMBERING OFFICER DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	FIRST RESPONDER JAN 2026 GEMS ADMIN/FIRST RESPONDER REIM DATES 1-23-26 THRU 2-19-2026 1ST RESPONDER JAN 2026		00041751	31 -6-01-6225		0.00	16,769.72 *

** TOTAL ** 16,769.72

*** 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

72 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.



INVOICE

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

Customer Number: 01-0172

Invoice Number: 12320262192026

Invoice Date: 2/24/2026

Due Date: 3/26/2026

P.O. # :

TREASURER
 GEMS-
 12205 S YUKON AVE
 GLENPOOL OK 74033

ITEM DESCRIPTION	UNITS	TYPE	PRICE	AMOUNT
1ST RESP RUNS FEB 2026	N/A	MONTH	N/A	16,769.72
FEBRUARY 2026				
1/23/2026-2/19/2026 *****THANK YOU*****			TOTAL DUE	\$16,769.72

Reg # 000 41751

GEMS ADMIN/FIRST RESPONDER REIMBURSEMENTS
1/23/2026-2/19/2026

TOTAL RUNS	204
EMR RUNS	142
FIRE RUNS	62
EMR RATIO	69.61%
RUN RATE	\$116.16
AMDIN	\$275.00
OVERTIME	

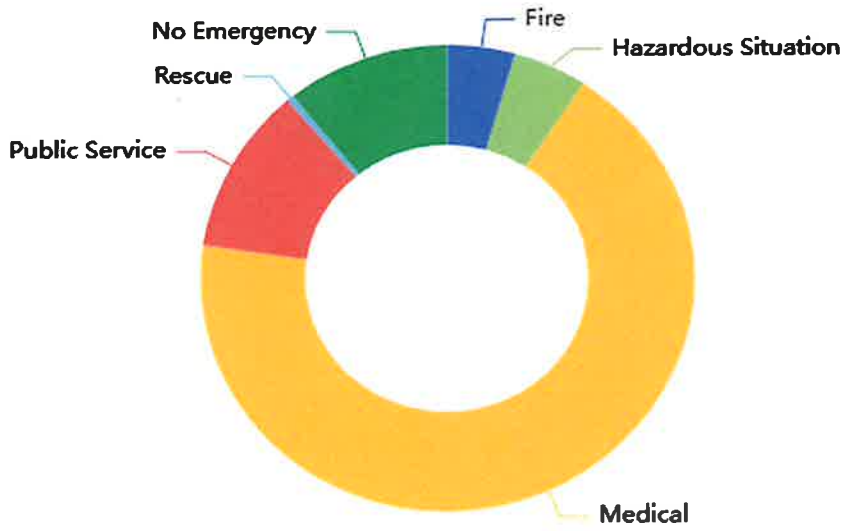
TOTAL	\$16,769.72
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Glenpool Fire Department Operations January 2026

1/23/26-2/19/26

GEMS

Run Type	# of Calls	Totals Calls
EMS Runs	142	204
Fire Runs	62	
Overlapping	37	



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 # 26-23505 02/25/2026

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.

02/25/2026

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. 02/25/2026

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	J. BRANNON GEMS TREA FEB 2026 INV NO. JB022026 J. BRANNON GEMS TREA FEB 2026		00041717	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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Reg # 050
41717

INVOICE

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

INVOICE #: JB022026

DATE: 3/2/2026

6BILL TO:

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

<u>Description</u>	<u>Amount</u>
Contract Fees & Services	
FEBRUARY 2026	\$208.33

Total **\$208.33**

If you have any questions concerning this invoice, Joshua Brannon / 918-209-4628 / Email:
Jbrannon@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 # 26-23504 02/25/2026

ISSUED TO: VENDOR #: 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.

02/25/2026

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. 02/25/2026

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	L. SMITH GEMS SEC FEB 2026 INV. LS022026 L. SMITH GEMS SEC FEB 2026		00041715	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 ITS PRICE, THE NUMBER OR VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Reg# 000 41715

INVOICE

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

INVOICE #: LS022026
DATE: 3/2/2026

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 2026	\$208.33

Total **\$208.33**

If you have any questions concerning this invoice, Lesli Smith / 918-209-4647 / Email:
Lsmith@cityofglenpool.com