

July 6, 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.

AGENDA

- A) **Call to Order - Joyce G. Calvert, Mayor**
- B) **Roll Call, Declaration of a Quorum - Lesli Smith, City Clerk; Joyce G. Calvert, Mayor**
- C) **EMS Report-**
 - 1) Brian Cook, Director of Operations, Mercy Regional EMS
- 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 June 1, 2026, meeting.
 - 2) To approve the purchase orders receiving report and payment claims as of 6/29/2026 totaling \$16,954.40.
- 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 7-2-2026 at 5:30 p.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: June 29, 2026

Ref: EMS Report May 27, 2026 – June 28, 2026

We logged 146 calls for service during this period while maintaining a 88% response time compliance.

88 patients were treated and transported.

32 patients refused transport.

14 cancelled

6 Mutual aid received.

4 DOA

2 false calls

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	Response Area	Incident Created	Dispatched Time	Enroute Resulting	AtScene Resulting	Response Time	Column1	Transporting Resulting	AtDestination Resulting	Completed Resulting	Cancelled Reason	Destination	Vehicle Name
99841	Glenpool	5/27/2026 09:49	5/27/2026 09:51	5/27/2026 09:53	5/27/2026 09:58	0:06:54		5/27/2026 09:57	5/27/2026 09:58	5/27/2026 09:58		Hilcrest South Hospital	MERCY 401
99960	Glenpool	5/27/2026 11:38	5/27/2026 11:38	5/27/2026 11:39	5/27/2026 11:43	0:04:51		5/27/2026 11:56	5/27/2026 12:15	5/27/2026 12:59		St John Tulsa Medical Center	MERCY 401
100093	Glenpool	5/27/2026 13:24	5/27/2026 13:24	5/27/2026 13:27	5/27/2026 13:30	0:03:06					Patient Refusal		MERCY 401
100773	Glenpool	5/27/2026 16:23	5/27/2026 16:24	5/27/2026 16:24	5/27/2026 16:29	0:05:41		5/27/2026 16:45	5/27/2026 17:04	5/27/2026 17:27		Hilcrest South Hospital	MERCY 401
101196	Glenpool	5/28/2026 00:17	5/28/2026 00:19	5/28/2026 00:19	5/28/2026 00:27	0:08:00		5/28/2026 00:13	5/28/2026 00:50	5/28/2026 01:34		Hilcrest Medical Center	MERCY 401
102117	Glenpool	5/28/2026 06:53	5/28/2026 06:53	5/28/2026 06:55	5/28/2026 06:59	0:05:47		5/28/2026 07:12	5/28/2026 07:40	5/28/2026 07:58		St Francis South Hospital	MERCY 401
103390	Glenpool	5/28/2026 15:11	5/28/2026 15:14	5/28/2026 15:24	5/28/2026 15:28	0:03:35		5/28/2026 15:58	5/28/2026 16:19	5/28/2026 16:41		St Francis Tulsa Hospital	MERCY 401
105758	Glenpool	5/29/2026 09:52	5/29/2026 09:52	5/29/2026 09:54	5/29/2026 09:59	0:06:36		5/29/2026 10:06	5/29/2026 10:28	5/29/2026 10:30		Hilcrest Medical Center	MERCY 401
106578	Glenpool	5/29/2026 13:29	5/29/2026 13:29	5/29/2026 13:31	5/29/2026 13:38	0:08:09		5/29/2026 13:55	5/29/2026 14:18	5/29/2026 14:32		St Francis South Hospital	MERCY 401
106737	Glenpool	5/29/2026 13:47	5/29/2026 13:47	5/29/2026 13:48	5/29/2026 13:58	0:09:54					Patient Refusal		MERCY 401
106838	Glenpool	5/29/2026 23:23	5/29/2026 23:23	5/29/2026 23:30	5/29/2026 23:36	0:12:07					Patient Refusal		MERCY 401
107451	Glenpool	5/30/2026 01:44	5/30/2026 01:48	5/30/2026 01:50	5/30/2026 01:57	0:03:54		5/30/2026 02:09	5/30/2026 02:24	5/30/2026 02:50		St Francis South Hospital	MERCY 401
108478	Glenpool	5/30/2026 08:06	5/30/2026 08:06	5/30/2026 08:07	5/30/2026 08:13	0:06:33		5/30/2026 08:30	5/30/2026 08:47	5/30/2026 08:58		St Francis Tulsa Hospital	MERCY 401
101091	Glenpool	5/30/2026 17:51	5/30/2026 17:51	5/30/2026 17:52	5/30/2026 17:59	0:07:09		5/30/2026 18:21	5/30/2026 18:38	5/30/2026 18:58		St Francis Tulsa Hospital	MERCY 401
1013025	Glenpool	6/1/2026 01:06	6/1/2026 01:06	6/1/2026 01:08	6/1/2026 01:13	0:07:06		6/1/2026 01:24	6/1/2026 01:39	6/1/2026 01:55		St Francis South Hospital	MERCY 401
101418	Glenpool	6/1/2026 12:06	6/1/2026 12:07	6/1/2026 12:08	6/1/2026 12:11	0:03:51		6/1/2026 12:26	6/1/2026 12:49	6/1/2026 13:15		Hilcrest South Hospital	MERCY 401
101574	Glenpool	6/1/2026 12:31	6/1/2026 12:31	6/1/2026 12:33	6/1/2026 12:38	0:06:08		6/1/2026 12:57	6/1/2026 13:04	6/1/2026 13:20		St Francis Glenpool	MERCY 401
1017340	Glenpool	6/2/2026 12:03	6/2/2026 12:04	6/2/2026 12:04	6/2/2026 12:06	0:02:25		6/2/2026 12:26	6/2/2026 12:46	6/2/2026 13:18		Hilcrest South Hospital	MERCY 401
1017384	Glenpool	6/2/2026 12:14	6/2/2026 12:15	6/2/2026 12:16	6/2/2026 12:18	0:02:05					DOA		AMBRO 110
101980	Glenpool	6/2/2026 20:01	6/2/2026 20:01	6/2/2026 20:03	6/2/2026 20:07	0:05:38							MERCY 401
1019823	Glenpool	6/2/2026 09:39	6/2/2026 09:11	6/2/2026 09:14	6/2/2026 09:18	0:07:02		6/2/2026 09:39	6/2/2026 09:50	6/2/2026 09:25		St Francis South Hospital	MERCY 401
1019850	Glenpool	6/3/2026 07:15	6/3/2026 07:15	6/3/2026 07:17	6/3/2026 07:20	0:05:05					Patient Refusal		MERCY 401
1020228	Glenpool	6/3/2026 09:55	6/3/2026 09:55	6/3/2026 09:56	6/3/2026 10:00	0:04:05		6/3/2026 10:18	6/3/2026 10:47	6/3/2026 10:56		St Francis South Hospital	MERCY 401
102040	Glenpool	6/3/2026 10:01	6/3/2026 10:02	6/3/2026 10:04	6/3/2026 10:08	0:06:18					Patient Refusal		DOA
1020553	Glenpool	6/3/2026 11:38	6/3/2026 11:38	6/3/2026 11:39	6/3/2026 11:44	0:05:18		6/3/2026 12:04	6/3/2026 12:27	6/3/2026 12:47		St Francis Tulsa Hospital	MERCY 401
1020763	Glenpool	6/3/2026 12:38	6/3/2026 12:39	6/3/2026 12:42							Cancelled by FD/PO		MERCY 402
1020787	Glenpool	6/3/2026 12:50	6/3/2026 12:51	6/3/2026 12:52	6/3/2026 12:57	0:06:38		6/3/2026 13:11	6/3/2026 13:50	6/3/2026 14:24		St Francis Tulsa Hospital	MERCY 401
1020897	Glenpool	6/3/2026 13:19	6/3/2026 13:19	6/3/2026 13:22	6/3/2026 13:32	0:03:16	Mutual Aid Given	6/3/2026 13:35	6/3/2026 13:52	6/3/2026 14:24		Hilcrest South Hospital	MERCY 401
1021334	Glenpool	6/3/2026 21:00	6/3/2026 21:01	6/3/2026 21:01	6/3/2026 21:05	0:04:24	Mutual Aid Given	6/3/2026 21:12	6/3/2026 21:33	6/3/2026 21:51		St Francis Tulsa Hospital	MERCY 401
1022596	Glenpool	6/3/2026 23:24	6/3/2026 23:24	6/3/2026 23:26	6/3/2026 23:30	0:05:22					Patient Refusal		MERCY 401
1022822	Glenpool	6/4/2026 08:59	6/4/2026 08:59	6/4/2026 08:59	6/4/2026 09:12	0:08:13		6/4/2026 09:16			Patient Refusal		MERCY 401
1024685	Glenpool	6/4/2026 15:24	6/4/2026 15:25	6/4/2026 15:25	6/4/2026 15:28	0:02:22		6/4/2026 15:50	6/4/2026 16:30	6/4/2026 16:33		St Francis South Hospital	MERCY 401
1025943	Glenpool	6/5/2026 08:00	6/5/2026 08:02	6/5/2026 08:03	6/5/2026 08:05	0:02:42					Cancelled by ED/PO		MERCY 401
1028675	Glenpool	6/5/2026 21:13	6/5/2026 21:13	6/5/2026 21:14	6/5/2026 21:14	0:00:53					Patient Refusal		MERCY 401
1028789	Glenpool	6/5/2026 22:14	6/5/2026 22:16	6/5/2026 22:17	6/5/2026 22:21	0:05:38		6/5/2026 23:14					MERCY 401
1028833	Glenpool	6/5/2026 22:59	6/5/2026 23:00	6/5/2026 23:02	6/5/2026 23:14	0:14:26	Mutual Aid Given	6/5/2026 23:34	6/5/2026 00:00	6/6/2026 00:13		Hilcrest South Hospital	MERCY 401
1028989	Glenpool	6/6/2026 12:24	6/6/2026 12:24	6/6/2026 12:25	6/6/2026 12:28	0:03:06					Cancelled by FD/PO		MERCY 401
1030351	Glenpool	6/6/2026 15:44	6/6/2026 15:45	6/6/2026 15:46	6/6/2026 15:48	0:03:06					Patient Refusal		MERCY 401
1030364	Glenpool	6/6/2026 15:54	6/6/2026 15:54	6/6/2026 15:54	6/6/2026 15:54	0:00:00		6/6/2026 16:38	6/6/2026 16:48	6/6/2026 16:32		St Francis Glenpool	MERCY 401
1030905	Glenpool	6/6/2026 18:39	6/6/2026 18:40	6/6/2026 18:40	6/6/2026 18:42	0:02:45		6/6/2026 18:57	6/6/2026 19:00	6/6/2026 19:15		St Francis Tulsa Hospital	MERCY 401
1031897	Glenpool	6/6/2026 21:50	6/6/2026 21:50	6/6/2026 21:51	6/6/2026 21:55	0:05:04		6/6/2026 22:24	6/6/2026 22:43	6/6/2026 23:00		St Francis Tulsa Hospital	MERCY 401
1031246	Glenpool	6/6/2026 23:49	6/6/2026 23:50	6/6/2026 23:51	6/6/2026 23:55	0:08:39		6/7/2026 00:40	6/7/2026 01:02	6/7/2026 01:37		Hilcrest Medical Center	MERCY 401
1031685	Glenpool	6/7/2026 06:42	6/7/2026 06:42	6/7/2026 06:44	6/7/2026 06:48	0:06:06					Patient Refusal		MERCY 401
1032721	Glenpool	6/7/2026 16:32	6/7/2026 16:32	6/7/2026 16:34	6/7/2026 16:36	0:04:10					Patient Refusal		MERCY 401
1033013	Glenpool	6/7/2026 19:03	6/7/2026 19:04	6/7/2026 19:04	6/7/2026 19:09	0:05:06					Calling Party		MERCY 401
1033037	Glenpool	6/7/2026 19:14	6/7/2026 19:14	6/7/2026 19:14	6/7/2026 19:20	0:05:54		6/7/2026 19:46	6/7/2026 19:51	6/7/2026 20:04		St Francis Glenpool	MERCY 401
1034250	Glenpool	6/8/2026 10:19	6/8/2026 10:19	6/8/2026 10:20	6/8/2026 10:22	0:03:03		6/8/2026 10:48	6/8/2026 10:48	6/8/2026 10:56		Hilcrest South Hospital	MERCY 401
1035728	Glenpool	6/8/2026 15:40	6/8/2026 15:40	6/8/2026 15:41	6/8/2026 15:45	0:05:13		6/8/2026 15:56	6/8/2026 16:21	6/8/2026 16:30		St Francis Tulsa Hospital	MERCY 401
1035804	Glenpool	6/8/2026 16:02	6/8/2026 16:02	6/8/2026 16:02	6/8/2026 16:06	0:04:05		6/8/2026 16:31	6/8/2026 16:51			Unit on Scene Cancelled	MERCY 401
1036128	Glenpool	6/8/2026 17:17	6/8/2026 17:18	6/8/2026 17:19	6/8/2026 17:25	0:06:44					Patient Refusal		MERCY 401
1036453	Glenpool	6/8/2026 19:00	6/8/2026 19:01	6/8/2026 19:02	6/8/2026 19:12	0:11:03					Patient Refusal		MERCY 401
1036577	Glenpool	6/8/2026 20:01	6/8/2026 20:01	6/8/2026 20:02	6/8/2026 20:06	0:05:04		6/8/2026 20:18	6/8/2026 20:32	6/8/2026 21:06		St Francis South Hospital	MERCY 401
1036656	Glenpool	6/8/2026 22:51	6/8/2026 22:51	6/8/2026 22:54	6/8/2026 22:58	0:05:00					Patient Refusal		MERCY 401
1039008	Glenpool	6/9/2026 17:58	6/9/2026 17:58	6/9/2026 17:59	6/9/2026 18:00	0:02:07		6/9/2026 18:22	6/9/2026 18:53	6/9/2026 19:18		St Francis South Hospital	MERCY 401
1039840	Glenpool	6/9/2026 19:54	6/9/2026 19:54	6/9/2026 19:54	6/9/2026 20:00	0:06:06		6/9/2026 20:20	6/9/2026 20:43	6/9/2026 21:13		Hilcrest Medical Center	MERCY 401
1041114	Glenpool	6/9/2026 10:51	6/9/2026 10:51	6/9/2026 10:54	6/9/2026 10:54	0:03:03		6/9/2026 10:54	6/9/2026 10:54	6/9/2026 11:11		St Francis Tulsa Hospital	MERCY 401
1041316	Glenpool	6/10/2026 10:57	6/10/2026 10:57	6/10/2026 10:59	6/10/2026 11:04	0:06:30		6/10/2026 11:26	6/10/2026 11:49	6/10/2026 12:13		St Francis Tulsa Hospital	MERCY 401
1041596	Glenpool	6/10/2026 12:24	6/10/2026 12:25	6/10/2026 12:25	6/10/2026 12:30	0:05:06		6/10/2026 12:42	6/10/2026 13:41	6/10/2026 13:26		St Francis Tulsa Hospital	MERCY 401
1043705	Glenpool	6/11/2026 02:21	6/11/2026 02:21	6/11/2026 02:22	6/11/2026 02:28	0:06:14		6/11/2026 02:45	6/11/2026 03:02	6/11/2026 03:26		St Francis Tulsa Hospital	MERCY 401
1043807	Glenpool	6/11/2026 06:14	6/11/2026 06:14	6/11/2026 06:18	6/11/2026 06:22	0:06:03		6/11/2026 06:34	6/11/2026 06:53	6/11/2026 07:18		St John Tulsa Medical Center	MERCY 401
1044751	Glenpool	6/11/2026 12:00	6/11/2026 12:00	6/11/2026 12:00	6/11/2026 12:04	0:04:20					Patient Refusal		MERCY 401
1044770	Glenpool	6/11/2026 12:00	6/11/2026 12:01	6/11/2026 12:02	6/11/2026 12:02	0:02:00							

1058299	Glenpool	6/16/2026 00:02	6/16/2026 00:03	6/16/2026 00:04	6/16/2026 00:07	0:04:08	6/16/2026 00:28	6/16/2026 00:50	6/16/2026 01:07	St John Tulsa Medical Center	MERCY 401
1058454	Glenpool	6/16/2026 08:36	6/16/2026 08:36	6/16/2026 08:38	6/16/2026 08:43	0:06:52	6/16/2026 08:01	6/16/2026 08:21	6/16/2026 08:54	St Francis Tulsa Hospital	MERCY 401
1059468	Glenpool	6/16/2026 11:36	6/16/2026 11:36	6/16/2026 11:37	6/16/2026 11:41	0:05:16	6/16/2026 12:11	6/16/2026 12:36	6/16/2026 13:04	St Francis Tulsa Hospital	MERCY 401
1060945	Glenpool	6/16/2026 15:10	6/16/2026 15:11	6/16/2026 15:12	6/16/2026 15:14	0:03:00	6/16/2026 15:26	6/16/2026 15:41	6/16/2026 16:15	St Francis Tulsa Hospital	MERCY 401
1061452	Glenpool	6/16/2026 22:55	6/16/2026 22:56	6/16/2026 22:57	6/16/2026 23:00	0:03:57	6/16/2026 23:19	6/16/2026 23:38	6/17/2026 00:14	St Francis Tulsa Hospital	MERCY 401
1061621	Glenpool	6/17/2026 00:39	6/17/2026 00:39	6/17/2026 00:40	6/17/2026 00:44	0:04:57	6/17/2026 01:20	6/17/2026 01:50	6/17/2026 02:11	St Francis Tulsa Hospital	MERCY 401
1061703	Glenpool	6/17/2026 01:45	6/17/2026 01:46	6/17/2026 01:48	6/17/2026 01:57	0:11:13	6/17/2026 02:26	6/17/2026 02:50	6/17/2026 03:21	Hilcrest South Hospital	MERCY 402
1062545	Glenpool	6/17/2026 10:53	6/17/2026 10:53	6/17/2026 10:53	6/17/2026 10:56	0:03:06				Patient Refusal	MERCY 401
1062894	Glenpool	6/17/2026 12:31	6/17/2026 12:32	6/17/2026 12:32	6/17/2026 12:33	0:01:52				Patient Refusal	MERCY 401
1063976	Glenpool	6/17/2026 16:33	6/17/2026 16:33	6/17/2026 16:33	6/17/2026 16:38	0:05:26	6/17/2026 16:50	6/17/2026 17:17	6/17/2026 17:56	St Francis South Hospital	MERCY 401
1064433	Glenpool	6/17/2026 18:51	6/17/2026 18:51	6/17/2026 18:54	6/17/2026 18:55	0:02:28	6/17/2026 19:13	6/17/2026 19:30	6/17/2026 19:58	St Francis Tulsa Hospital	MERCY 401
1064755	Glenpool	6/18/2026 18:49	6/18/2026 18:50	6/18/2026 18:51	6/18/2026 18:54	0:04:28	6/18/2026 19:13	6/18/2026 19:30	6/18/2026 20:02	St Francis Tulsa Hospital	MERCY 401
1064926	Glenpool	6/19/2026 01:15	6/19/2026 01:18	6/19/2026 01:18	6/19/2026 01:22	0:04:15				Patient Refusal	MERCY 401
1066671	Glenpool	6/19/2026 07:56	6/19/2026 07:56	6/19/2026 07:59	6/19/2026 08:02	0:05:53				Patient Refusal	MERCY 401
1069102	Glenpool	6/19/2026 10:21	6/19/2026 10:21	6/19/2026 10:22	6/19/2026 10:25	0:04:24	6/19/2026 10:40	6/19/2026 11:05	6/19/2026 11:16	St Francis South Hospital	MERCY 401
1070501	Glenpool	6/19/2026 16:56	6/19/2026 16:56	6/19/2026 16:56	6/19/2026 17:00	0:04:13	6/19/2026 17:10	6/19/2026 17:29	6/19/2026 17:43	Hilcrest South Hospital	MERCY 401
1070918	Glenpool	6/19/2026 17:04	6/19/2026 17:04	6/19/2026 17:04						Cancelled by FD/PO	MERCY 402
1070599	Glenpool	6/19/2026 17:35	6/19/2026 17:35	6/19/2026 17:35	6/19/2026 17:38	0:03:01				Patient Refusal	MERCY 402
1070704	Glenpool	6/19/2026 18:46	6/19/2026 18:46	6/19/2026 18:48	6/19/2026 18:53	0:07:18	6/19/2026 19:20	6/19/2026 19:25	6/19/2026 19:35	St Francis Tulsa Hospital	MERCY 401
1070923	Glenpool	6/19/2026 19:52	6/19/2026 19:52	6/19/2026 19:52	6/19/2026 19:55	0:02:49	6/19/2026 20:01	6/19/2026 20:16	6/19/2026 20:32	St Francis Tulsa Hospital	MERCY 401
1071857	Glenpool	6/20/2026 08:28	6/20/2026 08:28	6/20/2026 08:31	6/20/2026 08:36	0:07:41	6/20/2026 08:53	6/20/2026 09:08	6/20/2026 09:43	St Francis Tulsa Hospital	MERCY 401
1072602	Glenpool	6/20/2026 14:16	6/20/2026 14:16	6/20/2026 14:19	6/20/2026 14:21	0:04:53	6/20/2026 14:32	6/20/2026 14:38	6/20/2026 15:01	St Francis Glenpool	MERCY 401
1072909	Glenpool	6/20/2026 16:24	6/20/2026 16:24	6/20/2026 16:28	6/20/2026 16:32	0:08:11	6/20/2026 16:48	6/20/2026 17:07	6/20/2026 17:24	St Francis Tulsa Hospital	MERCY 401
1074094	Glenpool	6/21/2026 04:42	6/21/2026 04:43	6/21/2026 04:44	6/21/2026 04:47	0:04:10	6/21/2026 04:57	6/21/2026 05:13	6/21/2026 06:03	St Francis Tulsa Hospital	MERCY 401
1074854	Glenpool	6/21/2026 13:19	6/21/2026 13:19	6/21/2026 13:21	6/21/2026 13:26	0:06:47	6/21/2026 13:43	6/21/2026 14:08	6/21/2026 14:18	St Francis South Hospital	MERCY 401
1074929	Glenpool	6/22/2026 16:47	6/22/2026 16:47	6/22/2026 16:53	6/22/2026 16:59	0:12:02	6/22/2026 17:10	6/22/2026 17:16	6/22/2026 17:35	St Francis Glenpool	MERCY 401
1075102	Glenpool	6/23/2026 05:21	6/23/2026 05:21	6/23/2026 05:24	6/23/2026 05:24	0:03:28				Cancelled by FD/PO	MERCY 401
1075678	Glenpool	6/23/2026 05:21	6/23/2026 05:21	6/23/2026 05:24	6/23/2026 05:24	0:10:07	6/23/2026 05:39	6/23/2026 05:49	6/23/2026 06:13	St Francis Glenpool	MERCY 401
1079747	Glenpool	6/23/2026 06:34	6/23/2026 06:34	6/23/2026 06:39	6/23/2026 06:46	0:09:11				DOA	MERCY 401
1081771	Glenpool	6/23/2026 16:23	6/23/2026 16:24	6/23/2026 16:28	6/23/2026 16:33	0:09:07				DOA	MERCY 401
1081486	Glenpool	6/23/2026 16:42	6/23/2026 16:47	6/23/2026 16:47	6/23/2026 16:50	0:07:42	6/23/2026 17:05	6/23/2026 17:31	6/23/2026 17:59	St Francis Tulsa Hospital	MERCY 401
1082233	Glenpool	6/23/2026 19:43	6/23/2026 19:43	6/23/2026 19:47	6/23/2026 19:49	0:06:28	6/23/2026 20:10	6/23/2026 20:31	6/23/2026 20:58	Hilcrest Medical Center	MERCY 401
1082832	Glenpool	6/24/2026 01:14	6/24/2026 01:15	6/24/2026 01:21	6/24/2026 01:28	0:13:12	MURKIN AM Given			Patient Refusal	MERCY 401
1084849	Glenpool	6/24/2026 15:21	6/24/2026 15:22	6/24/2026 15:26	6/24/2026 15:33	0:11:44	6/24/2026 15:41	6/24/2026 16:06	6/24/2026 16:26	St Francis Tulsa Hospital	MERCY 401
1085209	Glenpool	6/24/2026 17:04	6/24/2026 17:04	6/24/2026 17:07	6/24/2026 17:14	0:10:15	6/24/2026 17:24	6/24/2026 17:43	6/24/2026 17:57	St Francis South Hospital	MERCY 401
1085519	Glenpool	6/24/2026 18:04	6/24/2026 18:04	6/24/2026 18:07	6/24/2026 18:09	0:04:51	6/24/2026 18:30	6/24/2026 18:35	6/24/2026 18:51	St Francis South Hospital	MERCY 401
1085634	Glenpool	6/24/2026 20:04	6/24/2026 20:05	6/24/2026 20:05	6/24/2026 20:28	0:23:07	Mutual Aid Given			Cancelled by FD/PO	MERCY 401
1085678	Glenpool	6/24/2026 20:24	6/24/2026 20:24	6/24/2026 20:28	6/24/2026 20:33	0:09:26	6/24/2026 20:44	6/24/2026 21:18	6/24/2026 21:37	St Francis South Hospital	MERCY 402
1085935	Glenpool	6/24/2026 22:41	6/24/2026 22:42	6/24/2026 22:45	6/24/2026 22:53	0:11:33				Patient Refusal	MERCY 401
1086044	Glenpool	6/25/2026 02:13	6/25/2026 02:18	6/25/2026 02:20	6/25/2026 02:26	0:10:30	6/25/2026 02:41	6/25/2026 03:00	6/25/2026 03:22	St Francis South Hospital	MERCY 402
1086205	Glenpool	6/25/2026 02:33	6/25/2026 02:33	6/25/2026 02:38	6/25/2026 02:44	0:10:23				False Call	MERCY 402
1086546	Glenpool	6/25/2026 07:34	6/25/2026 07:38	6/25/2026 07:39	6/25/2026 07:55	0:10:49	6/25/2026 08:34	6/25/2026 08:35	6/25/2026 08:37	Hilcrest South Hospital	MERCY 401
1087921	Glenpool	6/25/2026 13:41	6/25/2026 13:41	6/25/2026 13:42	6/25/2026 13:47	0:05:50	6/25/2026 14:05	6/25/2026 14:25	6/25/2026 14:51	Hilcrest South Hospital	MERCY 401
1089578	Glenpool	6/26/2026 02:21	6/26/2026 02:46	6/26/2026 02:46	6/26/2026 02:44	0:03:24				Expanded by FD/PO	MERCY 401
1091248	Glenpool	6/26/2026 14:02	6/26/2026 14:02	6/26/2026 14:05	6/26/2026 14:10	0:07:31	6/26/2026 14:33	6/26/2026 15:07	6/26/2026 15:19	St Francis South Hospital	MERCY 401
1091296	Glenpool	6/26/2026 14:18	6/26/2026 14:18	6/26/2026 14:18	6/26/2026 14:22	0:06:06	6/26/2026 14:31	6/26/2026 14:50	6/26/2026 14:55	St Francis Glenpool	MERCY 402
1091900	Glenpool	6/26/2026 17:13	6/26/2026 17:13	6/26/2026 17:15	6/26/2026 17:21	0:07:18	6/26/2026 17:34	6/26/2026 18:01	6/26/2026 18:15	St Francis South Hospital	MERCY 401
1094045	Glenpool	6/27/2026 13:50	6/27/2026 13:50	6/27/2026 13:57	6/27/2026 13:56	0:06:21	6/27/2026 14:31	6/27/2026 14:47	6/27/2026 15:12	St Francis Tulsa Hospital	MERCY 401
1095008	Glenpool	6/27/2026 20:21	6/27/2026 20:21	6/27/2026 20:21	6/27/2026 20:28	0:07:05	6/27/2026 20:46	6/27/2026 20:56	6/27/2026 21:13	St Francis Glenpool	MERCY 401
1095380	Glenpool	6/28/2026 00:40	6/28/2026 00:41	6/28/2026 00:43	6/28/2026 00:49	0:06:25				Patient Refusal	MERCY 401
1096030	Glenpool	6/28/2026 10:02	6/28/2026 10:02	6/28/2026 10:04	6/28/2026 10:07	0:04:33				DOA	MERCY 401
1096310	Glenpool	6/28/2026 12:06	6/28/2026 12:06	6/28/2026 12:06	6/28/2026 12:09	0:03:14	6/28/2026 12:23	6/28/2026 12:42	6/28/2026 12:54	St Francis South Hospital	MERCY 401
1096990	Glenpool	6/28/2026 17:18	6/28/2026 17:18	6/28/2026 17:19	6/28/2026 17:24	0:06:05	6/28/2026 17:38	6/28/2026 18:02	6/28/2026 18:16	St Francis South Hospital	MERCY 401

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



To Oklahoma & You™

Dir 1 251 5

9498X0C.004 BNCF:0008760



24-Hour
 Automated
 Account Information

1-877-602-2262

2 *0008760
 GLENPOOL AREA EMERGENCY MEDICAL
 SERVICE DISTRICT
 12205 S YUKON AVE
 GLENPOOL OK 74033-6635

PAGE 1

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 5/29/26

SPRING Loan SALE

Spring into what's next!
 Make your plans bloom with financing built around your next project. Our lenders can help make it happen with flexible options and personal service you can depend on.*

BANCFIRST.BANK

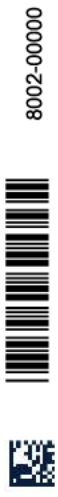
*With approved credit for consumer purpose loans only. An escrow account may be required for payment of taxes and insurance. If escrow is required under regulations, escrow cannot be waived.

ACCOUNT ANALYSIS

Beginning Balance	5/01/26	489,286.95	
Deposits / Misc Credits	1	22,972.40	
Withdrawals / Misc Debits	5	25,828.08	
** Ending Balance	5/31/26	486,431.27	**

Service Charge		.00	
Enclosures		5	

DEPOSITS								
Date	Deposits	Withdrawals	Activity Description					
5/12	22,972.40		TULSA COUNTY/REMIT					
CHECKS								
<small>* indicates skip in check numbers</small>								
Date	Check No.	Amount	Date	Check No.	Amount	Date	Check No.	Amount
5/15	2310	15,000.00	5/20	2312	208.33	5/18	2314	30.50
5/15	2311	10,380.92	5/19	2313	208.33			
DAILY BALANCE SUMMARY								
Date	Balance		Date	Balance		Date	Balance	
5/12	512,259.35		5/18	486,847.93		5/20	486,431.27	
5/15	486,878.43		5/19	486,639.60				



Statement Date: 5/29/26

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** 002310
MEDICAL SERVICE DISTRICT
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635
 Glenpool, Oklahoma 39-363/1030

PAY --- FIFTEEN THOUSAND & 90/100 DOLLARS --- DATE CHECK AMOUNT
 05/12/2026 \$*****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

⑈002310⑈ ⑆103003632⑆

Number: 2310 Date: 5/15/2026 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** 002311
MEDICAL SERVICE DISTRICT
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635
 Glenpool, Oklahoma 39-363/1030

PAY --- TEN THOUSAND THREE HUNDRED EIGHTY & 92/100 DOLLARS --- DATE CHECK AMOUNT
 05/12/2026 \$*****10,380.92

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

BancFirst
 103003632
 MAY 14 2026
 Teller 0070049
 Glenpool, OK

BY *[Signature]*
 AUTHORIZED SIGNATURES

⑈002311⑈ ⑆103003632⑆ 54

Number: 2311 Date: 5/15/2026 Amount: \$10380.92

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** 002312
MEDICAL SERVICE DISTRICT
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635
 Glenpool, Oklahoma 39-363/1030

PAY --- TWO HUNDRED EIGHT & 33/100 DOLLARS --- DATE CHECK AMOUNT
 05/12/2026 \$*****208.33

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

BY *[Signature]*
 AUTHORIZED SIGNATURES

⑈002312⑈ ⑆103003632⑆

Number: 2312 Date: 5/20/2026 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** 002313
MEDICAL SERVICE DISTRICT
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635
 Glenpool, Oklahoma 39-363/1030

PAY --- TWO HUNDRED EIGHT & 33/100 DOLLARS --- DATE CHECK AMOUNT
 05/12/2026 \$*****208.33

TO THE ORDER OF
 ** LESLI SMITH **

BY *[Signature]*
 AUTHORIZED SIGNATURES

⑈002313⑈ ⑆103003632⑆

Number: 2313 Date: 5/19/2026 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** 002314
MEDICAL SERVICE DISTRICT
 12205 S. YUKON AVE. PH. 918-322-5409
 GLENPOOL, OK 74033-6635
 Glenpool, Oklahoma 39-363/1030

PAY --- THIRTY & 50/100 DOLLARS --- DATE CHECK AMOUNT
 05/12/2026 \$*****30.50

TO THE ORDER OF
 ** ROSENSTEIN, FIST & RINGOLD, INC. **
 SUITE 700
 525 SOUTH MAIN STREET
 TULSA, OK 74103-4508

BY *[Signature]*
 AUTHORIZED SIGNATURES

⑈002314⑈ ⑆103003632⑆

Number: 2314 Date: 5/18/2026 Amount: \$30.50

4022-00000



PERIOD: 5/01/2026 - 5/31/2026

ACCOUNT: 31-1001 GEMS CASH IN BANK

RECONCILIATION SUMMARY

BEGINNING STATEMENT BALANCE:	489,286.95	GL ACCOUNT BALANCE:	486,431.27
DEPOSITS:	+ 22,972.40	OUTSTANDING DEPOSITS:	- 0.00
WITHDRAWALS:	+ 25,828.08CR	OUTSTANDING CHECKS:	- 0.00
ADJUSTMENTS:	+ <u>0.00</u>	ADJUSTMENTS:	+ <u>0.00</u>
ENDING STATEMENT BALANCE:	486,431.27	ADJUSTED GL ACCOUNT BALANCE:	486,431.27

STATEMENT BALANCE: 486,431.27
 BANK DIFFERENCE: 0.00
 G/L DIFFERENCE: 0.00

CLEARED DEPOSITS:

5/12/2026	JULY GEMS TAX DEP FROM TC	<u>22,972.40</u>
TOTAL CLEARED DEPOSITS:		22,972.40
		=====

CLEARED CHECKS:

5/12/2026	002310	CENTURION HEALTH SYSTEMS, DBA M	15,000.00CR
5/12/2026	002311	CITY OF GLENPOOL - GEMS	10,380.92CR
5/12/2026	002312	JOSHUA M. BRANNON	208.33CR
5/12/2026	002313	LESLI SMITH	208.33CR
5/12/2026	002314	ROSENSTEIN, FIST & RINGOLD, INC	<u>30.50CR</u>
TOTAL CLEARED CHECKS:			25,828.08CR
			=====

CLEARED OTHER:

No Items.

31 -GEMS

ACCOUNT #	ACCOUNT DESCRIPTION	BALANCE	
<hr/>			
ASSETS			
=====			
31-1001	GEMS CASH IN BANK	486,431.27	
31-1302	PREPAID PAYROLL TAXES	0.00	
31-1303	TAXES RECEIVABLE	0.00	
31-1353	EQUIPMENT	71,085.14	
31-1354	ACCUM DEPREC - EQUIPMENT	(<u>42,651.08</u>)	
			<u>514,865.33</u>
	TOTAL ASSETS		514,865.33
			=====
LIABILITIES			
=====			
31-2001	ACCOUNTS PAYABLE	0.00	
31-2101	FICA LIABILITY	0.00	
31-2102	MED TAX LIABILITY	0.00	
31-2103	FEDERAL W/H PAYABLE	0.00	
31-2104	STATE W/H PAYABLE	0.00	
31-2130	OPEB LIABILITY	0.00	
31-2131	DEFERRED INFLOWS	<u>0.00</u>	
	TOTAL LIABILITIES		<u>0.00</u>
EQUITY			
=====			
31-3001	FUND BALANCE	<u>383,003.17</u>	
	TOTAL BEGINNING EQUITY	383,003.17	
	TOTAL REVENUE	474,709.70	
	TOTAL EXPENSES	<u>342,847.54</u>	
	TOTAL REVENUE OVER/ (UNDER) EXPENSES	131,862.16	
	TOTAL EQUITY & REV. OVER/ (UNDER) EXP.		<u>514,865.33</u>
	TOTAL LIABILITIES, EQUITY & REV.OVER/ (UNDER) EXP.		514,865.33
			=====

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

31 -GEMS
FINANCIAL SUMMARY

% OF YEAR COMPLETED: 91.67

	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	437,896.00	22,972.40	0.00	474,709.70	0.00	(36,813.70)	108.41
TOTAL REVENUES	437,896.00	22,972.40	0.00	474,709.70	0.00	(36,813.70)	108.41
=====							
<u>EXPENDITURE SUMMARY</u>							
GEMS	437,896.00	0.00	0.00	342,847.54	29,797.85	65,250.61	85.10
TOTAL EXPENDITURES	437,896.00	0.00	0.00	342,847.54	29,797.85	65,250.61	85.10
=====							
REVENUE OVER/ (UNDER) EXPENDITURES	0.00	22,972.40	0.00	131,862.16	(29,797.85)	0.00	0.00

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

31 -GEMS

% OF YEAR COMPLETED: 91.67

REVENUES	CURRENT BUDGET	CURRENT PERIOD	PRIOR YEAR PO ADJUST.	Y-T-D ACTUAL	Y-T-D ENCUMBRANCE	BUDGET BALANCE	% OF BUDGET
<hr/>							
NON-DEPARTMENTAL							
=====							
<u>TAXES</u>							
31-5-00-5006 TAXES	<u>417,157.00</u>	<u>22,972.40</u>	<u>0.00</u>	<u>474,709.70</u>	<u>0.00</u>	(<u>57,552.70</u>)	<u>113.80</u>
TOTAL TAXES	417,157.00	22,972.40	0.00	474,709.70	0.00	(57,552.70)	113.80
<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	<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
<u>OTHER FINANCING SOURCES</u>							
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	<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 NON-DEPARTMENTAL	437,896.00	22,972.40	0.00	474,709.70	0.00	(36,813.70)	108.41
<hr/>							
** TOTAL REVENUES **	437,896.00	22,972.40	0.00	474,709.70	0.00	(36,813.70)	108.41
	=====	=====	=====	=====	=====	=====	=====

31 -GEMS

% OF YEAR COMPLETED: 91.67

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
31-6-01-6126 CLAIMS FUNDING	<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 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	4,591.58	283.15	625.27	88.63
31-6-01-6206 MINOR EQUIPMENT	<u>2,500.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>2,500.00</u>	<u>0.00</u>
TOTAL SUPPLIES	8,000.00	0.00	0.00	4,591.58	283.15	3,125.27	60.93
<u>OTHER CHARGES & SERVICES</u>							
31-6-01-6210 AMBULANCE CONTRACT	180,000.00	0.00	0.00	165,000.00	15,000.00	0.00	100.00
31-6-01-6225 FIRST RESPONDER/ADMIN FEES	203,678.00	0.00	0.00	158,520.56	14,098.04	31,059.40	84.75
31-6-01-6235 CONTRACT SERVICES	13,800.00	0.00	0.00	8,737.80	416.66	4,645.54	66.34
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	<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 OTHER CHARGES & SERVICES	423,396.00	0.00	0.00	338,255.96	29,514.70	55,625.34	86.86
<u>TRAVEL & TRAINING</u>							
31-6-01-6262 TRAVEL AND TRAINING	<u>6,500.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>6,500.00</u>	<u>0.00</u>
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	<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 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	<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 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	<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 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	342,847.54	29,797.85	65,250.61	85.10
<hr/>							
TOTAL EXPENDITURES	437,896.00	0.00	0.00	342,847.54	29,797.85	65,250.61	85.10
=====							
REVENUE OVER/(UNDER) EXPENDITURES	0.00	22,972.40	0.00	131,862.16 (29,797.85) (102,064.31)	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	93.3%	97.5%	98.2%	100.7%	92.1%	90.7%	85.6%
March	95.5%	98.7%	100.2%	103.2%	94.0%	92.4%	87.6%
April	103.2%	108.4%	108.6%	110.9%	101.8%	101.7%	93.3%
May	108.4%	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 May 31, 2026 GEMS received 108.4% of tax revenue originally budgeted.
 In other words, \$474,709.70 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:	29 May 2028	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:	29 August 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:	15 April 2027	Exp. Date:	15 April 2027
	{ Exp. Date:	15 April 2027	Exp. Date:	15 April 2027

2-IV Start Kits

2-EZ Stabilizers	Exp. Date:	31 March 2031	Exp. Date:	02 May 2027
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2-45mm 15g IO Needle Set	Exp. Date:	30 November 2027	Exp. Date:	31 December 2026
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2-25mm 15g IO Needle Set	Exp. Date:	31 March 2027	Exp. Date:	31 July 2028
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1-IV Bag	Exp. Date:	31 March 2028
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1 Pressure Bag

AIRWAY COMPARTMENT

1-2.5 ET Tube	Exp. Date:	31 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:	31 October 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:	31 March 2028	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 May 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:		Exp. Date:
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 September 2026	Exp. Date: 30 September 2026
1 - 2% Lidocane Hcl	Exp. Date:	28 February 2026	
1 - Nebulizer Kit	<input type="checkbox"/>		
3 - Albuterol 2.5mg	Exp:	30 September 2027	Exp: 30 September 2027
	Exp:		Exp: 30 September 2027
1 - Levalbuterol 1.25	Exp. Date:	30 September 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:	30 September 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)

2 IV bags

2 IV/IO drop admin sets

Seal:

001

New Seal:

061

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

Seal:

002

New Seal:

075

Exp.:

09 October 2026

Exp.:

09 October 2026



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

Bop Right Pocket: (Ped/Infant)

Seal:

New Seal:

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

Exp.:

GDF STAFF



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
 - 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	<input checked="" type="checkbox"/>			
2-EZ Stabilizers	Exp. Date:	02 May 2027	Exp. Date:	19 March 2029
2-45mm 15g IO Needle Set	Exp. Date:	30 June 2026	Exp. Date:	30 November 2028
2-25mm 15g IO Needle Set	Exp. Date:	30 September 2029	Exp. Date:	31 July 2028
1-IV Bag	Exp. Date:	31 March 2028		
1 Pressure Bag	<input type="checkbox"/>			

AIRWAY COMPARTMENT

1-2.5 ET Tube	Exp. Date:	16 July 2026	1-7.0 ET Tube	Exp. Date:	02 June 2026
1-3.0 ET Tube	Exp. Date:	17 December 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:	17 September 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:	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:	01 September 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:	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:	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:	30 June 2027	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	28 February 2027	Exp. Date: 28 February 2027
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:	14 October 2028	Exp. Date: 14 October 2028
2 - 18/20g Hypo. Needle	Exp. Date:	01 March 2027	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:	28 September 2026	Exp. Date: 28 May 2027
1 - 2% Lidocaine Hcl	Exp. Date:	28 May 2027	
1 - Nebulizer Kit	<input checked="" type="checkbox"/>		
3 - Albuterol 2.5mg	Exp:	30 September	Exp: 30 September
1 - Levalbuterol 1.25mg	Exp. Date:	31 August 2026	
1 - Levalbuterol 0.31mg	Exp. Date:	31 August 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)

- | | | | |
|-------------------------|--|-----------|--|
| Seal: | <input type="text" value="118032"/> | New Seal: | <input type="text" value="118062"/> |
| 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 | <input checked="" type="checkbox"/> | | |
-

Center Pocket

- | | | | |
|------------------------|--|-----------|---|
| Seal: | <input type="text" value="118033"/> | New Seal: | <input type="text" value="118064"/> |
| Exp.: | <input type="text" value="09 October 2026"/> | Exp.: | <input type="text" value="09 October 2026"/> |
| 2-Asherman chest seals | | | |
| 2- 4X4 Gauze | <input checked="" type="checkbox"/> | | |
| 1-Roll white duct tape | <input checked="" type="checkbox"/> | | |
| 1-Tactical Tourniquet | <input checked="" type="checkbox"/> | | |
| 3- 5X9 Gauze | <input checked="" type="checkbox"/> | | |
| 2-Rolls Coban | <input checked="" type="checkbox"/> | | |
| 2- Ice packs | <input checked="" type="checkbox"/> | | |
| 2- Stretch Gauze | <input checked="" type="checkbox"/> | | |
| 1- OB Kit | <input checked="" type="checkbox"/> | Exp.: | <input type="text" value="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:

118036

New Seal:

118063

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

Bottom Left Pocket

Seal:

118035

New Seal:

118066

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

Top Right Pocket: (Ped/Infant)

Seal:

118031

New Seal:

118065

- 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
 JUNE 1, 2026

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

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

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

- C) **EMS Report- Brian Cook, Director of Operations, Mercy Regional EMS**
 - 1) EMS Report - Brian Cook, Director of Operations, Mercy Regional EMS
 Director Cook reported on the dates of 4-29-2026 through 5-26-2026.

- D) **District Administrator Report-**
 - 1) District Administrator Report
 There was no formal GEMS District 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 May 4, 2026, meeting.

- 2) To approve the Professional Services Contract with Lesli Smith to perform, as an independent contractor, the duties of GEMS District Clerk for the Fiscal Year 2026-2027.
- 3) To approve the Professional Services Contract with Joshua Brannon to perform, as an independent contractor, the duties of GEMS District Treasurer/Finance Officer for the Fiscal Year 2026-2027.
- 4) To approve the Administrative Operations Agreement between the GEMS District and the City of Glenpool setting out certain clerical and accounting services to be provided by the City of Glenpool to GEMS as well as Emergency Medical Response Agency emergency medical services for Fiscal Year 2026-2027.
- 5) To approve the purchase orders receiving report and payment claims as of 5/22/2026 totaling \$29,97.85.
- 6) To approve the Engagement Letter from Crawford & Associates, P.C. to prepare the Estimate of Needs for FY 2026-2027.

Moved by Chris Brobst, seconded by Jaci Triplett-Lund

For	Against
Jaci Triplett-Lund, Joyce Calvert, Chris Brobst, Shayne Buchanan	None
4	0

Abstained	Absent
None	Tim Fox
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

- 1) Discussion and possible action to approve, amend, or deny Resolution No. 2026001GEMS, a Resolution of the Governing Body of the Glenpool Area Emergency Medical Service District, to Comply with and Operate in Accordance with the Emergency Medical Service District Budget Act and Approve the Fiscal Year 2026-2027 Annual Budget.

Moved by Joyce Calvert, seconded by Shayne Buchanan

For	Against
Jaci Triplett-Lund, Joyce Calvert, Chris Brobst, Shayne Buchanan	None
4	0

Abstained	Absent
None	Tim Fox
0	

To approve Resolution No. 2026001GEMS, a Resolution of the Governing Body of the Glenpool Area Emergency Medical Service District, to Comply with and Operate in Accordance with the Emergency Medical Service District Budget Act and Approve the Fiscal Year 2026-2027 Annual Budget.

CARRIED.

J) **Adjournment**

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

To: Honorable Chair and GEMS District Board Members

From: Josh Brannon, Finance Director

Meeting Date: July 6, 2026

Department/Office: Finance

Item Name: To approve the purchase orders receiving report and payment claims as of 6/29/2026 totaling \$16,954.40.

Summary:

To approve the purchase orders receiving report and payment claims as of 6/29/2026 totaling \$16,954.40.

Recommended Action:

Staff recommends a motion to accept the PO Receipt Register report dated 6/29/2026 and approve the following payments:

PO #	Account	Vendor	Description	Inv#	Amount
26-24256	31-6-01-6225	City of Glenpool	1st Responder June 2026	MAY-JUN2026	\$16,537.74
26-24258	31-6-01-6235	Joshua Brannon	District Treasurer	JB062026	\$208.33
26-24257	31-6-01-6235	Lesli Smith	District Clerk	LS062026	\$208.33
				Total	\$16,954.40

Budget:

Attachments:

1. GEMS Packet 07-06-26

P O R E C E I P T R E G I S T E R
A U D I T R E P O R T

VENDOR	NAME			INVOICE AMOUNT	VENDOR TOTAL
	INVOICE	POST DATE	BANK		
31-000005	CITY OF GLENPOOL - GEMS				16,537.74
	MAY2026	6/30/2026	31	16,537.74	
31-000033	JOSHUA M. BRANNON				208.33
	JB062026	6/30/2026	31	208.33	
31-000032	LESLI SMITH				208.33
	LS062026	6/30/2026	31	208.33	
TOTALS				16,954.40	16,954.40

APPROVED

BY

Joyce G. Calvert, July 6, 2026

PURCHASE ORDER CLAIM REGISTER
SUMMARY REPORT

<u>PURCHASE ORDER</u>	<u>DESCRIPTION</u>	<u>VENDOR #</u>	<u>VENDOR NAME</u>	<u>DATE INVOICE</u>	<u>AMOUNT</u>
DEPARTMENT: 01 - NON-DEPARTMENTAL					
26-24256	1ST RESPONDER MAY 2026	31-000005	CITY OF GLENPOOL - GEMS	6/2026 MAY2026	16,537.74
26-24257	GEMS SEC JUNE 2026	31-000032	LESLI SMITH	6/2026 LS062026	208.33
26-24258	GEMS DIST TREA JUNE 2026	31-000033	JOSHUA M. BRANNON	6/2026 JB062026	208.33
DEPARTMENT TOTAL:					16,954.40
FUND TOTAL:					16,954.40
GRAND TOTAL:					16,954.40

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 # 26-24256 06/29/2026

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.

06/29/2026

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. 06/29/2026

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	1ST RESPONDER MAY 2026 5/22/26-6/23/26 1ST RESPONDER MAY 2026		00042750	31 -6-01-6225		0.00	16,537.74 *

** TOTAL ** 16,537.74

*** 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.



INVOICE

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

Customer Number: 01-0172

Invoice Number: MAY2026

Invoice Date: 6/29/2026

Due Date: 7/23/2026

P.O. # :

TREASURER
 GEMS-
 12205 S YUKON AVE
 GLENPOOL OK 74033

ITEM DESCRIPTION	UNITS	TYPE	PRICE	AMOUNT
1ST RESPNR OPS 5/22/26-6/23-26	N/A	MONTH	N/A	16,537.74

5/22/2026-6/23/2026

*****THANK YOU*****	TOTAL DUE	\$16,537.74
---------------------	------------------	-------------

Reg# 00042750

GEMS ADMIN/FIRST RESPONDER REIMBURSEMENTS
5/22/2026-6/23/2026

TOTAL RUNS	198
EMR RUNS	140
FIRE RUNS	58
EMR RATIO	70.71%
RUN RATE	\$116.16
AMDIN	\$275.00
OVERTIME	

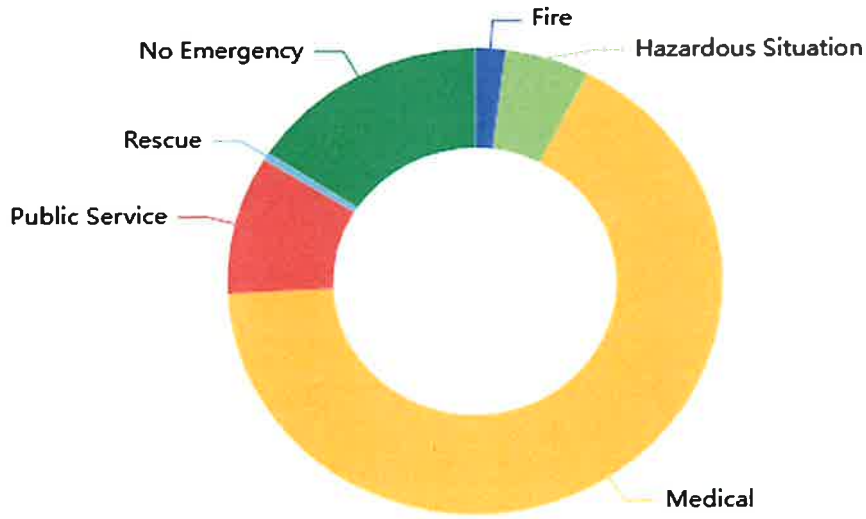
TOTAL \$16,537.74

Glenpool Fire Department Operations May 2026

5/22/26-6/23/26

GEMS

Run Type	# of Calls	Totals Calls
EMS Runs	140	198
Fire Runs	58	
Overlapping	40	



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 # 26-24257 06/29/2026

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.

06/29/2026

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. 06/29/2026

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS SEC JUNE 2026 GEMS SEC JUNE 2026		00042753	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 # 00042753

INVOICE

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

INVOICE #: LS062026

DATE: 6/30/2026

BILL 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	
JUNE 2026	\$208.33

Total **\$208.33**

If you have any questions concerning this invoice, Lesli Smith / 918-209-4647 / Email:
Lsmith@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 # 26-24258 06/29/2026

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.

06/29/2026

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. 06/29/2026

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS DIST TREA JUNE 2026 GEMS DIST TREA JUNE 2026		00042751	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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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# 00042751

INVOICE

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

INVOICE #: JB062026

DATE: 6/30/2026

6BILL 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 JUNE 2026	\$208.33

Total **\$208.33**

If you have any questions concerning this invoice, Joshua Brannon / 918-209-4628 / Email:
Jbrannon@cityofglenpool.com