

AGENDA REQUEST FORM

Agenda Item: To consider and/or approve a Lease Agreement between the Cleveland County Health Department and Airgas for lease and refill of Oxygen tanks.

Name of Person Submitting Request: Melody Bays, Regional Director

Address: Cleveland County Health Department
250 12th Ave. NE
Norman, OK 73071

Phone: (405) 579-2261

Date Requested: 6/9/2026

Description of Agenda Item including purpose for consideration by Board of County Commissioners (include type of Motion requested).

To consider and/or approve Lease Agreement between Cleveland County Health Department and Airgas for lease and refill of Oxygen tanks for Norman and Moore offices.

Leasing 3 tanks at \$75.68 per cylinder per year. Total of \$227.04 plus hazmat charges.

This agreement is for one year beginning July 1, 2026 to June 30, 2027

Internal Use Only

Received by: _____

Acknowledge: _____ (Chairman)

Date Assigned: _____

_____ (Member)

Applicant Notified: _____

_____ (Member)

Routine (Consent) Item: _____

Other Parties Notified: _____



AIRGAS USA, LLC
PO Box 1152
Tulsa, OK 74101

CYLINDER LEASE RENEWAL

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
06/01/2026	4384094	5525348941	07/01/2026	\$ 311.94

SOLD BY AIRGAS USA, LLC (C014)
2701 W RENO AVE
OKLAHOMA CITY OK 73107-6858
405-235-8621

Manage Your Account Online 24/7

Access order history, view cylinder balances, get proofs of delivery,
pay invoices and more -- visit Airgas.com today



Please send new or updated blanket purchase orders to: CEBSCPOCoordinator@airgas.com



1Pass - B13 - 189904-21-7-1 - 5277

BILL TO CLEVELAND COUNTY HEALTH DEPT
250 12TH AVE NE
NORMAN OK 73071-5237



005277
3

PLEASE MAKE CHECKS PAYABLE AND REMIT TO:



Airgas USA, LLC
PO BOX 734671
DALLAS TX 75373-4671

43840941552534894100000311944

TO ENSURE PROPER CREDIT, PLEASE RETURN THE UPPER PORTION WITH YOUR REMITTANCE. FOR QUESTIONS ON YOUR ACCOUNT PLEASE CALL: 1-855-470-2666

ORDER NO.		INVOICE NO.		INVOICE DATE		SOLD TO NO.		SOLD TO NAME						
7126592683		5525348941		06/01/2026		4384094		CLEVELAND COUNTY HEALTH DEPT						
PO / RELEASE				ORDERED BY			SHIP VIA		PAYMENT TERMS		ORDER DATE			
20262489									NET 30		04/16/2026			
DELIVERY NO. / DESCRIPTION		MATERIAL NUMBER		QTY SHIP'D		UOM		QTY B/O		CYLINDER		UNIT PRICE	UOM	AMOUNT
										SHPD RETD				
7126592683		LSECYL		3		CL						75.68	YR	227.04 T
LEASE CYL														(H)
LEASE RENEWAL 07/01/2026 TO 06/30/2027														

Airgas Hazmat Chg ML

Sale subtotal: 227.04
59.80

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

Effective 9/15/2025, we may impose a surcharge of 3% on the transaction amount for credit card transactions on account, which is not greater than our cost of acceptance. We do not impose a surcharge on debit cards or auto-pay transactions.

For customers with a Billing Zip Code in Colorado, see terms of payment on reverse or visit www.airgas.com/terms-of-sale.

Sales Tax: 25.10

AMOUNT 311.94



AIRGAS USA, LLC
PO Box 1152
Tulsa, OK 74101

SHIP TO: 4384094
CLEVELAND COUNTY HEALTH DEPT
250 12TH AVE NE
NORMAN OK 73071-5237

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 550372236
JPMC Bank, ABA No 021000021
www-global-remits@airgas.com

FOR CHANGE Email: cdlv.return.mail@airgas.com
OF ADDRESS Phone: 855-470-2666