



GEORGIA TRAUMA COMMISSION

FY 2027 EMS TRAUMA-RELATED EQUIPMENT GRANT | SECTION 3: DESCRIPTION OF EQUIPMENT

Instructions: Complete the table below with the eligible equipment that has been purchased or will be purchased and put into service. See **ATTACHMENT B** for the list of approved equipment. The amount you may request is listed in **ATTACHMENT A**.

If the total cost of the equipment is more than the approved amount, you will only be reimbursed up to the amount allocated to your agency. If the total cost is less than the approved amount, you will be reimbursed for the amount requested.

Do not enter "see invoice" in the table. Each piece of equipment must be listed separately. Applications that include "see invoice" instead of itemized equipment will be returned to the sender.

After completing this spreadsheet, attach it to your application above Section 4 (page 5) of the electronic application (the same section where the affidavit is uploaded).

Grand Total of All Items Purchased/Purchasing (can include freight/shipping) *Auto Calculates* \$ 17,881.23					
Equipment Item	Equipment Category *Drop Down Menu*	Peds or Adult Equipment *Drop Down Menu*	Item Unit Price (\$)	Item Quantity (#)	Total (\$) *Auto Calculates*
1 AutoVent 2000	Airway & Breathing	Both	\$3,559.49	1.00	\$3,559.49
2 AutoVent Circuits	Airway & Breathing	Both	\$19.65	39.00	\$ 766.35
3 Aegis Neonate Wraps	Patient Movement & Transport	Peds	\$143.99	20.00	\$ 2,879.80
4 Aegis Straps	Patient Movement & Transport	Peds	\$55.43	20.00	\$ 1,108.60
5 Intraosseous Needle Kits 15mm	Circulation & Vascular Access	Both	\$73.65	20.00	\$ 1,473.00
6 Intraosseous Needle Kits 25mm	Circulation & Vascular Access	Both	\$73.65	20.00	\$ 1,473.00
7 Intraosseous Needle Kits 45mm	Circulation & Vascular Access	Both	\$73.65	20.00	\$ 1,473.00
8 Portable Suction Units	Airway & Breathing	Both	\$1,352.99	3.00	\$ 4,058.97
9 CAT Tourniquets	Hemorrhage Control	Both	\$32.03	34.00	\$ 1,089.02
10					
11					
12					\$ -
13					\$ -
14					\$ -
15					\$ -