

# Sayreville Board of Education

## Bills And Claims Report By Vendor Name

**Dental Account - February 21, 2023**

va\_bill5.102317  
01/13/2023

Vendor # / Name	PO #	Account # / Description	Inv #	Check Type *	Check Description or Multi Remit To Check Name	Check #	Check Amount
<b>Unposted Checks</b>							
<b>DELTA DENTAL OF NEW JERSEY, INC./ 1231</b>							
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	JANUARY ADMIN	HF	SELF INSURED DENTAL	82022123	2,017.80
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	JANUARY ADMIN	HF	SELF INSURED DENTAL	82022123	560.88
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/01/23-01/07/ 23	HF	SELF INSURED DENTAL	82022123	9,841.70
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/01/23-01/07/ 23	HF	SELF INSURED DENTAL	82022123	1,845.60
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/08/23-01/14/ 23	HF	SELF INSURED DENTAL	82022123	14,166.80
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/08/23-01/14/ 23	HF	SELF INSURED DENTAL	82022123	1,838.40
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/15/23-01/21/ 23	HF	SELF INSURED DENTAL	82022123	9,505.20
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/15/23-01/21/ 23	HF	SELF INSURED DENTAL	82022123	1,374.90
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/22/23-01/28/ 23	HF	SELF INSURED DENTAL	82022123	12,197.00
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/22/23-01/28/ 23	HF	SELF INSURED DENTAL	82022123	3,505.85
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/29/23-02/04/ 23	HF	SELF INSURED DENTAL	82022123	11,141.80
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	01/29/23-02/04/ 23	HF	SELF INSURED DENTAL	82022123	1,372.80
	23-82001	82-000-291-270-000-55-04/ SELF INSURED DENTAL	02/05/23-02/11/ 23	HF	SELF INSURED DENTAL	82022123	8,919.80
	23-82002	82-000-291-270-000-55-04/ SELF INSURED DENTAL	02/05/23-02/11/ 23	HF	SELF INSURED DENTAL	82022123	1,319.00
<b>Total for DELTA DENTAL OF NEW JERSEY, INC./ 1231</b>							<b>\$79,607.53</b>
<b>Total for Unposted Checks</b>							<b>\$79,607.53</b>

\* CF -- Computer Full CP - Computer Partial HF - Hand Check Full HP - Hand Check Partial

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*Resolution that the list of claims for goods received and services rendered and certified to be correct by the Business Administrator, be approved for payment and further that the Secretary's and Treasurer's financial reports be accepted as filed.*

Run on 02/17/2023 at 12:00:19 PM

Fund Summary	Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
	82	82			\$79,607.53		\$79,607.53
	GRAND	TOTAL	\$0.00	\$0.00	\$79,607.53	\$0.00	\$79,607.53

School Business Administrator

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