

Sayreville Board of Education

Bills And Claims Report By Vendor Name

va_bill5.032923
07/13/2023

Prescription Bills List 8/29/2023

Vendor # / Name	PO #	Account # / Description	Inv #	Check Type *	Check Description or Multi Remit To Check Name	Check #	Check Amount
Unposted Checks							
CVS PHARMACY, INC./ 2412							
	24-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	07/16/2023-7/23/2023	HF	Self Insured Prescriptio	81080123	64,590.89
	24-81002	81-000-291-270-000-55-02/ Self Insured Prescriptio	07/16/2023-7/23/2023	HF	Self Insured Prescriptio	81080123	31,940.71
	24-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	07/16/2023-7/23/2023	HF	Self Insured Prescriptio	81080123	1,402.52
	24-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	07/24/2023-7/31/2023	HF	Self Insured Prescriptio	81081023	43,152.27
	24-81002	81-000-291-270-000-55-02/ Self Insured Prescriptio	07/24/2023-7/31/2023	HF	Self Insured Prescriptio	81081023	27,811.59
	24-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	07/24/2023-7/31/2023	HF	Self Insured Prescriptio	81081023	29.41
	24-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	08/01/23-08/07/23	HF	Self Insured Prescriptio	81081423	42,225.38
	24-81002	81-000-291-270-000-55-02/ Self Insured Prescriptio	08/01/23-08/07/23	HF	Self Insured Prescriptio	81081423	13,963.21
	24-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	08/08/23-8/15/23	HF	Self Insured Prescriptio	81082223	52,471.84
	24-81002	81-000-291-270-000-55-02/ Self Insured Prescriptio	08/08/23-8/15/23	HF	Self Insured Prescriptio	81082223	18,833.32
	24-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	08/08/23-8/15/23	HF	Self Insured Prescriptio	81082223	1,520.08
Total for CVS PHARMACY, INC./ 2412							\$297,941.22
Total for Unposted Checks							\$297,941.22

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

Sayreville Board of Education

Bills And Claims Report By Vendor Name

va_bill5.032923
07/13/2023

Prescription Bills List 8/29/2023

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 08/24/2023 at 10:55:05 AM

Fund Summary	Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
	81	81			\$297,941.22		\$297,941.22
	GRAND	TOTAL	\$0.00	\$0.00	\$297,941.22	\$0.00	\$297,941.22

School Business Administrator
