Sayreville Board of Education Bills And Claims Report By Vendor Name

va_bill5.032923 08/15/2023

Medical Bills List- 9/26/2023

Vendor# / Name			Check	_		
	PO#	Account # / Description	Inv # Type '	* Multi Remit To Check Name	Check # Che	eck Amount
Unposted Chec	eks					
HORIZON BCBSNJ/	/ 1380					
	24-85001	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	08/21/2023-8/27 HF /2023	SELF INSURED MEDICAL	85083123	57,944.88
	24-85002	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	08/21/2023-8/27 HF /2023	SELF INSURED MEDICAL	85083123	109,145.27
	24-85003	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	08/21/2023-8/27 HF /2023	SELF INSURED MEDICAL	85083123	125,644.96
	24-85004	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	08/21/2023-8/27 HF /2023	SELF INSURED MEDICAL	85083123	108,084.61
	24-85005	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	08/21/2023-8/27 HF /2023	SELF INSURED MEDICAL	85083123	3,300.93
	24-85001	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/04/23-09/10/ HF 23	SELF INSURED MEDICAL	85091923	43,668.94
	24-85002	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/04/23-09/10/ HF 23	SELF INSURED MEDICAL	85091923	17,322.97
	24-85003	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/04/23-09/10/ HF 23	SELF INSURED MEDICAL	85091923	193,746.04
	24-85004	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/04/23-09/10/ HF 23	SELF INSURED MEDICAL	85091923	269,538.68
	24-85005	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/04/23-09/10/ HF 23	SELF INSURED MEDICAL	85091923	476.86
	24-85001	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/01/23-09/03/ HF 23	SELF INSURED MEDICAL	85090823	22,356.83
	24-85002	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/01/23-09/03/ HF 23	SELF INSURED MEDICAL	85090823	7,284.04
	24-85003	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/01/23-09/03/ HF 23	SELF INSURED MEDICAL	85090823	26,991.10
	24-85004	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/01/23-09/03/ HF 23	SELF INSURED MEDICAL	85090823	60,959.59
	24-85005	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	09/01/23-09/03/ HF 23	SELF INSURED MEDICAL	85090823	1.46
	24-85001 24-85002	85-000-291-270-000-55-01/ SELF INSURED MEDICAL 85-000-291-270-000-55-01/ SELF INSURED MEDICAL	7/31/23-7/31/23 HF 7/31/23-7/31/23 HF	SELF INSURED MEDICAL SELF INSURED MEDICAL	85091323 85091323	54,392.62 20,096.94

^{*} CF -- Computer Full CP - Computer Partial HF - Hand Check Full HP - Hand Check Partial Run on 09/22/2023 at 01:04:06 PM

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Vendor # / Name Check Description or							
	PO#	Account # / Description	lnv #	Type *	Multi Remit To Check Name	Check #	Check Amount
Unposted Chec	eks						
	24-85003	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	7/31/23-7/31/2	3 HF	SELF INSURED MEDICAL	85091323	36,399.65
	24-85004	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	7/31/23-7/31/2	3 HF	SELF INSURED MEDICAL	85091323	34,874.45
	24-85005	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	7/31/23-7/31/2	3 HF	SELF INSURED MEDICAL	85091323	788.46
	24-85006	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	7/31/23-7/31/2	3 HF	SELF INSURED MEDICAL	85091323	23,008.47
		85-000-291-270-000-55-01/ SELF INSURED MEDICAL	JULY 2023	HF	SELF INSURED MEDICAL	850927232	176,046.22
			ADMIN				
	24-85001	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	8/28/23-8/31/2	3 HF	SELF INSURED MEDICAL	850927233	58,900.00
	24-85002	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	8/28/23-8/31/2	3 HF	SELF INSURED MEDICAL	850927233	83,029.03
	24-85003	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	8/28/23-8/31/2	3 HF	SELF INSURED MEDICAL	850927233	201,842.31
	24-85004	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	8/28/23-8/31/2	3 HF	SELF INSURED MEDICAL	850927233	74,723.23
	24-85005	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	8/28/23-8/31/2	3 HF	SELF INSURED MEDICAL	850927233	1,099.60
	24-85006	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	8/28/23-8/31/2	3 HF	SELF INSURED MEDICAL	850927233	28,686.13
	23-01389B	P8-000-291-270-000-55-01/ SELF INSURED MEDICAL	23-01389	HF	SELF INSURED MEDICAL	850927231	115,392.60
			Tot	al for HC	PRIZON BCBSNJ/ 1380		\$1,955,746.87
					Total for Unpo	sted Checks	\$1,955,746.87

* CF -- Computer Full CP - Computer Partial HF - Hand Check Full HP - Hand Check Partial Run on 09/22/2023 at 01:04:06 PM

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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 09/22/2023 at 01:04:06 PM

Fund Summary

Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
85	85			\$1,840,354.27		\$1,840,354.27
85	P8			\$115,392.60		\$115,392.60
Fund 85	TOTAL			\$1,955,746.87		\$1,955,746.87
GRAND	TOTAL	\$0.00	\$0.00	\$1,955,746.87	\$0.00	\$1,955,746.87

School Buisness Administrator