

Sayreville Board of Education

Bills And Claims Report By Vendor Name

va_bill5.032923
01/30/2025

Prescription Bills List 2/18/25

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							
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/08/25-01/15/25	HF	Self Insured Prescriptio	81012325	61,536.48
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/08/25-01/15/25	HF	Self Insured Prescriptio	81012325	83,043.88
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/08/25-01/15/25	HF	Self Insured Prescriptio	81012325	123.38
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/16/25-1/23/25	HF	Self Insured Prescriptio	81013125	71,967.14
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/16/25-1/23/25	HF	Self Insured Prescriptio	81013125	52,234.19
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/16/25-1/23/25	HF	Self Insured Prescriptio	81013125	1,293.40
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/24/25-1/31/25	HF	Self Insured Prescriptio	81021025	58,798.69
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/24/25-1/31/25	HF	Self Insured Prescriptio	81021025	32,468.30
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/24/25-1/31/25	HF	Self Insured Prescriptio	81021025	1,823.91
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/01/25-02/07/25	HF	Self Insured Prescriptio	81021425	109,152.97
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/01/25-02/07/25	HF	Self Insured Prescriptio	81021425	44,018.40
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/01/25-1/31/25	HF	Self Insured Prescriptio	81021125	756.50
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/01/25-1/31/25	HF	Self Insured Prescriptio	81021125	2,183.64
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/01/25-1/31/25	HF	Self Insured Prescriptio	81021125	45.00
Total for CVS PHARMACY, INC./ 2412							\$519,445.88
Total for Unposted Checks							\$519,445.88

* 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 02/14/2025 at 01:55:58 PM

Fund Summary	Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
	81	81			\$519,445.88		\$519,445.88
	GRAND	TOTAL	\$0.00	\$0.00	\$519,445.88	\$0.00	\$519,445.88

School Business Administrator
