

Sayreville Board of Education

Bills And Claims Report By Vendor Name

va_bill5.032923
02/14/2025

Prescription Bills List 3/18/25

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	02/08/25-02/15/ 25	HF	Self Insured Prescriptio	81022525	53,346.27
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/08/25-02/15/ 25	HF	Self Insured Prescriptio	81022525	44,107.16
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/08/25-02/15/ 25	HF	Self Insured Prescriptio	81022525	1,659.39
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/16/25-02/23/ 25	HF	Self Insured Prescriptio	81022825	76,098.63
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/16/25-02/23/ 25	HF	Self Insured Prescriptio	81022825	47,536.69
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/16/25-02/23/ 25	HF	Self Insured Prescriptio	81022825	316.11
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/01/25-02/28/ 25	HF	Self Insured Prescriptio	810310251	821.05
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/01/25-02/28/ 25	HF	Self Insured Prescriptio	810310251	1,578.46
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/01/25-02/28/ 25	HF	Self Insured Prescriptio	810310251	0.90
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/24/25-02/28/ 25	HF	Self Insured Prescriptio	810310252	83,208.77
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/24/25-02/28/ 25	HF	Self Insured Prescriptio	810310252	44,668.06
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	02/24/25-02/28/ 25	HF	Self Insured Prescriptio	810310252	504.74
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/01/25-03/07/ 25	HF	Self Insured Prescriptio	81031425	88,098.08
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/01/25-03/07/ 25	HF	Self Insured Prescriptio	81031425	52,972.94
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/01/25-03/07/ 25	HF	Self Insured Prescriptio	81031425	1,296.86
Total for CVS PHARMACY, INC./ 2412							\$496,214.11
Total for Unposted Checks							\$496,214.11

* 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 03/13/2025 at 03:10:05 PM

Fund Summary	Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
	81	81			\$496,214.11		\$496,214.11
	GRAND	TOTAL	\$0.00	\$0.00	\$496,214.11	\$0.00	\$496,214.11

School Business Administrator
