

Sayreville Board of Education

Bills And Claims Report By Vendor Name

Prescripton Bills List 4/29/25

va_bill5.032923
03/31/2025

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	04/01/25-04/07/ 25	HF	Self Insured Prescriptio	810422251	65,633.39
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	04/01/25-04/07/ 25	HF	Self Insured Prescriptio	810422251	53,559.33
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	04/01/25-04/07/ 25	HF	Self Insured Prescriptio	810422252	1.14
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	04/08/25-04/15/ 25	HF	Self Insured Prescriptio	810422252	78,339.36
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	04/08/25-04/15/ 25	HF	Self Insured Prescriptio	810422252	44,581.95
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	04/08/25-04/15/ 25	HF	Self Insured Prescriptio	810422252	1,450.78
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/01/25-03/31/ 25	HF	Self Insured Prescriptio	810409251	6,341.61
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/01/25-03/31/ 25	HF	Self Insured Prescriptio	810409251	4,947.68
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/01/25-03/31/ 25	HF	Self Insured Prescriptio	810409252	0.50
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/08/25-03/15/ 25	HF	Self Insured Prescriptio	81032625	56,609.45
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/08/25-03/15/ 25	HF	Self Insured Prescriptio	81032625	58,496.03
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/08/25-03/15/ 25	HF	Self Insured Prescriptio	81032625	1,294.54
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/16/25-03/23/ 25	HF	Self Insured Prescriptio	81040125	48,645.86
	25-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/16/25-03/23/ 25	HF	Self Insured Prescriptio	81040125	47,944.95
	25-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/16/25-03/23/ 25	HF	Self Insured Prescriptio	81040125	71.24
	25-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	03/24/25-03/31/ 25	HF	Self Insured Prescriptio	810409252	80,114.74

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

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Unposted Checks								
	25-81003		81-000-291-270-000-55-02/ Self Insured Prescriptio	03/24/25-03/31/ 25	HF	Self Insured Prescriptio	810409252	44,145.33
	25-81004		81-000-291-270-000-55-02/ Self Insured Prescriptio	03/24/25-03/31/ 25	HF	Self Insured Prescriptio	810409252	1,800.30
Total for CVS PHARMACY, INC./ 2412								\$593,978.18
Total for Unposted Checks								\$593,978.18

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

Run on 04/25/2025 at 10:44:25 AM

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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 04/25/2025 at 10:44:25 AM

Fund Summary	Fund	Sub	Computer	Computer	Hand	Hand	Total
	Category	Fund	Checks	Checks Non/AP	Checks	Checks Non/AP	Checks
	81	81			\$593,978.18		\$593,978.18
	GRAND	TOTAL	\$0.00	\$0.00	\$593,978.18	\$0.00	\$593,978.18

School Buisness Administrator