Sayreville Board of Education
Bills And Claims Report By Vendor Name
Medical Account - June 30, 2025

Vendor # / Name PO #	Account # / Description	Inv #	Check Type *	Check Description or Multi Remit To Check Name	Check #	Check Amount
Unposted Checks						
HORIZON BCBSNJ/ 1380						
25-85001	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HF	SELF INSURED MEDICAL	85063025	147,397.31
25-85002	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HP	SELF INSURED MEDICAL	85063025	-894.66
	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HF	SELF INSURED MEDICAL	85063025	29,720.55
25-85003	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HF	SELF INSURED MEDICAL	85063025	20,402.26
25-85004	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HF	SELF INSURED MEDICAL	85063025	139,299.85
25-85005	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HF	SELF INSURED MEDICAL	85063025	47,469.84
25-85006	85-000-291-270-000-55-01/ SELF INSURED MEDICAL	05/26/25-05/31/ 25	HF	SELF INSURED MEDICAL	85063025	32,120.50
				Total for HORIZON BCBSNJ/ 1380		**$415,515.65**
				Total for Unposted Checks		**$415,515.65**

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

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 07/15/2025 at 10:38:49 AM

Fund Summary

Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
85	85			$415,515.65		$415,515.65
GRAND	TOTAL	$0.00	$0.00	$415,515.65	$0.00	$415,515.65

School Business Administrator

_____