

# Sayreville Board of Education

## Bills And Claims Report By Vendor Name

va\_bill5.032923  
11/14/2025

**Prescription Account - December 16, 2025**

Vendor # / Name	PO #	Account # / Description	Inv #	Check Type *	Check Description or Multi Remit To Check Name	Check #	Check Amount
<b>Unposted Checks</b>							
<b>CVS PHARMACY, INC./ 2412</b>							
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/08/25-11/15/ 2025	HF	Self Insured Prescriptio	81112525	90,326.57
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/08/25-11/15/ 2025	HF	Self Insured Prescriptio	81112525	60,851.99
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/16/25-11/23/ 25	HF	Self Insured Prescriptio	81112625	51,130.42
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/16/25-11/23/ 25	HF	Self Insured Prescriptio	81112625	41,870.35
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/08/25-11/15/ 25 AD	HF	Self Insured Prescriptio	811208251	67.93
		81-000-291-270-000-55-02/ Self Insured Prescriptio	11/16/25-11/23/ 25 AD	HF	Self Insured Prescriptio	811208252	22.10
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/24/25-11/30/ 25	HF	Self Insured Prescriptio	811208253	37,052.95
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/24/25-11/30/ 25	HF	Self Insured Prescriptio	811208253	78,203.50
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	11/24/25-11/30/ 25	HP	Self Insured Prescriptio	811208253	-36.08
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	NOV 25 ADMIN	HF	Self Insured Prescriptio	811208254	976.85
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	NOV 25 ADMIN	HF	Self Insured Prescriptio	811208254	1,516.52
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	NOV 25 ADMIN	HF	Self Insured Prescriptio	811208254	5.00
<b>Total for CVS PHARMACY, INC./ 2412</b>							<b>\$361,988.10</b>
<b>Total for Unposted Checks</b>							<b>\$361,988.10</b>

\* 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 12/12/2025 at 08:47:22 AM

Fund Summary	Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
	81	81			\$361,988.10		\$361,988.10
	GRAND	TOTAL	\$0.00	\$0.00	\$361,988.10	\$0.00	\$361,988.10

School Business Administrator

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