

Brick Board of Education

Bills And Claims Report By PO Number

WIRE PAYMENTS: 02/14/19 BOARD MEETING

va_bill4.102317
01/31/2019

PO #	Account # / Description	Inv #	Vendor # / Name	Check Type	Check Description or Multi Remit To Check Name	Check #	Check Amount
Unposted Checks							
19-03160							
	40-701-510-910-00-000-000/ Debt Service Principal						
	PRINCIPAL 2/1/19		3556 / CHASE NYC DEPOSITORY TRUST CO.	HF	Debt Service Principal	888888888	1,320,000.00
	40-701-510-834-00-000-000/ Debt Service Interest						
	INTEREST 2/1/19		3556 / CHASE NYC DEPOSITORY TRUST CO.	HF	Debt Service Interest	888888888	120,312.50
			Total for 19-03160				\$1,440,312.50
19-03262							
	11-000-291-270-00-003-000/ MEDICAL INSURANCE						
	DECEMBER 2018		1900 / HORIZON BLUE CROSS BLUE SHIELD OF NJ	HF	MEDICAL INSURANCE	888888888	10,467.67
			Total for 19-03262				\$10,467.67
19-04187							
	11-000-291-270-00-003-000/ MEDICAL INSURANCE						
	DECEMBER 2018 TPA		8843 / HORIZON BC/BS 3RD PARTY ADMIN.	HF	MEDICAL INSURANCE	888888888	39,011.42
			Total for 19-04187				\$39,011.42
19-04188							
	11-000-291-270-00-003-000/ MEDICAL INSURANCE						
	DECEMBER 2018 H&W		8842 / HORIZON BC/BS HEALTH & WELLNESS FEE	HF	MEDICAL INSURANCE	888888888	9,139.03
			Total for 19-04188				\$9,139.03
19-06521							
	11-000-291-270-00-003-000/ MEDICAL INSURANCE						
	CLAIMS 1/21-1/27/19		8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	326,766.88
			Total for 19-06521				\$326,766.88
19-06527							
	11-000-291-270-00-004-000/ PRESCRIPTION						
	INV#1208 (1/15-2/1)		3644 / BOLLINGER INSURANCE	HF	PRESCRIPTION	888888888	325,595.28
			Total for 19-06527				\$325,595.28
			Total for Unposted Checks				\$2,151,292.78

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

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Posted Checks								
NAP Check								
	DB:10-141-02 CR:10-101-							
			8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY	HF	STATE SHARE FICA 1/30/19	888888888	224,722.71	
			Total for NAP Check					\$224,722.71
19-03065								
	11-000-291-220-00-000-000/ Social Security							
	BRD SHARE FICA 1/30/		8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY	HF	Social Security	888888888	69,490.48	
			Total for 19-03065					\$69,490.48
19-03262								
	11-000-291-270-00-003-000/ MEDICAL INSURANCE							
	NOVEMBER 2018		1900 / HORIZON BLUE CROSS BLUE SHIELD OF NJ	HF	MEDICAL INSURANCE	888888888	38,671.84	
			Total for 19-03262					\$38,671.84
19-03903								
	12-000-400-800-00-000-000/ REDUCTION OF DEBT SERVIC							
	STATE AID 1/21/18		4576 / NJ DEPT. OF EDUCATION/SCHOOL FUNDING	HF	REDUCTION OF DEBT SERVIC	888888888	3,876.35	
	STATE AID 1/8/19		4576 / NJ DEPT. OF EDUCATION/SCHOOL FUNDING	HF	REDUCTION OF DEBT SERVIC	888888888	3,876.35	
			Total for 19-03903					\$7,752.70
19-03914								
	11-000-100-568-99-000-000/ Tuition-State Facilities							
	STATE AID 1/8/19		1269 / STATE FACILITIES (VARIOUS LOCATIONS)	HF	Tuition-State Facilities	888888888	6,789.70	
	STATE AID 1/21/19		1269 / STATE FACILITIES (VARIOUS LOCATIONS)	HF	Tuition-State Facilities	888888888	6,789.70	
			Total for 19-03914					\$13,579.40
19-04187								
	11-000-291-270-00-003-000/ MEDICAL INSURANCE							
	NOVEMBER TPA		8843 / HORIZON BC/BS 3RD PARTY ADMIN.	HF	MEDICAL INSURANCE	888888888	39,025.56	
			Total for 19-04187					\$39,025.56
19-04188								
	11-000-291-270-00-003-000/ MEDICAL INSURANCE							
	NOVEMBER H&W		8842 / HORIZON BC/BS HEALTH & WELLNESS FEE	HF	MEDICAL INSURANCE	888888888	9,074.94	
			Total for 19-04188					\$9,074.94
19-05220								
	11-000-291-270-00-003-000/ MEDICAL INSURANCE							
	12/17-12/23/18 CLAIM		8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	319,454.44	
	12/24-12/30/18 CLAIM		8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	460,308.39	
	12/31/18 CLAIMS/CAP/		8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	38,775.10	

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PO #	Account # / Description	Inv #	Vendor # / Name	Check Type * Multi	Check Description or Remit To Check Name	Check #	Check Amount
Posted Checks							
							Total for 19-05220
							\$818,537.93
19-05226	11-000-291-270-00-004-000/ PRESCRIPTION						
		#1182 (12/15-1/1/19)	3644 / BOLLINGER INSURANCE	HF	PRESCRIPTION	888888888	288,551.75
							Total for 19-05226
							\$288,551.75
19-06018	11-000-100-565-99-000-000/ Tuition-CSSD & Regional						
		STATE AID 1/8/19	1268 / DAY TRAINING	HF	Tuition-CSSD & Regional	888888888	2,589.60
		STATE AID 1/21/19	1268 / DAY TRAINING	HF	Tuition-CSSD & Regional	888888888	2,589.60
							Total for 19-06018
							\$5,179.20
19-06521	11-000-291-270-00-003-000/ MEDICAL INSURANCE						
		1/7-1/13/19 CLAIMS	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	306,661.39
		CLAIMS 1/14-1/20/19	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	537,135.85
		1/1-1/6/19 CLAIMS	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	296,036.93
							Total for 19-06521
							\$1,139,834.17
19-06527	11-000-291-270-00-004-000/ PRESCRIPTION						
		1/1-1/15/19 CLAIMS	3644 / BOLLINGER INSURANCE	HF	PRESCRIPTION	888888888	233,170.00
							Total for 19-06527
							\$233,170.00
Total for Posted Checks							\$2,887,590.68

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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.

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Fund Summary		Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
		10	10				\$224,722.71	\$224,722.71
		10	11			\$3,366,095.55		\$3,366,095.55
		10	12			\$7,752.70		\$7,752.70
		Fund 10	TOTAL			\$3,373,848.25	\$224,722.71	\$3,598,570.96
		40	40			\$1,440,312.50		\$1,440,312.50
		GRAND	TOTAL	\$0.00	\$0.00	\$4,814,160.75	\$224,722.71	\$5,038,883.46

Chairman Finance Committee

Member Finance Committee
