

Brick Board of Education

Bills And Claims Report By PO Number

WIRE PAYMENTS: 09/12/19 BOARD MEETING

va_bill4.102317
07/31/2019

| PO # | Account # / Description | Inv # | Vendor # / Name | Check Type * Multi | Check Description or Remit To Check Name | Check # | Check Amount | |
|------------------------|---|-------|--|--------------------|--|-----------|--------------|--------------------|
| Unposted Checks | | | | | | | | |
| NAP Check | | | | | | | | |
| | DB:10-141-02 CR:10-101- | | | | | | | |
| | | | 8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY | HF | STATE SHARE FICA 8/15/19 | 888888888 | 14,342.97 | |
| | | | Total for NAP Check | | | | | \$14,342.97 |
| 20-03627 | | | | | | | | |
| | 11-000-291-220-00-000-000/ Social Security | | | | | | | |
| | BRD SHARE SS 8/15/19 | | 8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY | HF | Social Security | 888888888 | 48,171.25 | |
| | | | Total for 20-03627 | | | | | \$48,171.25 |
| 20-03778 | | | | | | | | |
| | 11-000-291-270-00-006-000/ OTHER HEALTH INSUR COSTS | | | | | | | |
| | AUGUST 2019 | | 3579 / STATE OF NJ HEALTH BENEFITS | HF | OTHER HEALTH INSUR COSTS | 888888888 | 2,189.29 | |
| | | | Total for 20-03778 | | | | | \$2,189.29 |
| 20-04184 | | | | | | | | |
| | 40-701-510-834-00-000-000/ Debt Service Interest | | | | | | | |
| | INTEREST 9/1/19 | | 3556 / CHASE NYC DEPOSITORY TRUST CO. | HF | Debt Service Interest | 888888888 | 17,681.25 | |
| | | | Total for 20-04184 | | | | | \$17,681.25 |
| 20-04524 | | | | | | | | |
| | 11-000-291-270-00-003-000/ MEDICAL INSURANCE | | | | | | | |
| | JULY H&W | | 8842 / HORIZON BC/BS HEALTH & WELLNESS FEE | HF | MEDICAL INSURANCE | 888888888 | 8,551.33 | |
| | | | Total for 20-04524 | | | | | \$8,551.33 |
| 20-04525 | | | | | | | | |
| | 11-000-291-270-00-003-000/ MEDICAL INSURANCE | | | | | | | |
| | JULY TPA | | 8843 / HORIZON BC/BS 3RD PARTY ADMIN. | HF | MEDICAL INSURANCE | 888888888 | 36,389.92 | |
| | | | Total for 20-04525 | | | | | \$36,389.92 |
| 20-04639 | | | | | | | | |
| | 11-000-291-270-00-003-000/ MEDICAL INSURANCE | | | | | | | |
| | CLAIMS 7/22-7/28/19 | | 8844 / HORIZON BC/BS CLAIMS | HF | MEDICAL INSURANCE | 888888888 | 457,027.69 | |
| | CLAIMS/CAP 7/29-7/31 | | 8844 / HORIZON BC/BS CLAIMS | HF | MEDICAL INSURANCE | 888888888 | 203,008.39 | |
| | CLAIMS 8/1-8/4/19 | | 8844 / HORIZON BC/BS CLAIMS | HF | MEDICAL INSURANCE | 888888888 | 217,019.07 | |
| | 20-218-200-200-99-000-027/ BENEFITS PEEA | | | | | | | |
| | CLAIMS 8/1-8/4/19 | | 8844 / HORIZON BC/BS CLAIMS | HF | BENEFITS PEEA | 888888888 | 23,563.58 | |
| | 60-910-310-270-67-000-000/ CAFE HEALTH BENEFITS | | | | | | | |
| | CLAIMS 8/1-8/4/19 | | 8844 / HORIZON BC/BS CLAIMS | HF | CAFE HEALTH BENEFITS | 888888888 | 30,218.19 | |
| | 65-990-330-270-68-000-000/ HEALTH INSURANCE | | | | | | | |
| | CLAIMS 8/1-8/4/19 | | 8844 / HORIZON BC/BS CLAIMS | HF | HEALTH INSURANCE | 888888888 | 893.39 | |
| | 11-000-291-270-00-003-000/ MEDICAL INSURANCE | | | | | | | |

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

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|------------------------|--|---------------------|-----------------------------|--------------|--|-----------|-----------------------|
| Unposted Checks | | | | | | | |
| | | CLAIMS 8/5-8/11/19 | 8844 / HORIZON BC/BS CLAIMS | HF | MEDICAL INSURANCE | 888888888 | 503,305.79 |
| | | CLAIMS 8/12-8/18/19 | 8844 / HORIZON BC/BS CLAIMS | HF | MEDICAL INSURANCE | 888888888 | 530,453.68 |
| | | CLAIMS 8/19-8/25/19 | 8844 / HORIZON BC/BS CLAIMS | HF | MEDICAL INSURANCE | 888888888 | 314,064.48 |
| | | | Total for 20-04639 | | | | \$2,279,554.26 |
| 20-04661 | 11-000-291-270-00-004-000/ PRESCRIPTION | | | | | | |
| | | #1359 (7/15-8/1/19) | 3644 / BOLLINGER INSURANCE | HF | PRESCRIPTION | 888888888 | 272,771.92 |
| | | | Total for 20-04661 | | | | \$272,771.92 |
| | | | | | Total for Unposted Checks | | \$2,679,652.19 |

* 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 09/06/2019 at 12:23:42 PM

| Fund Summary | | Fund Category | Sub Fund | Computer Checks | Computer Checks Non/AP | Hand Checks | Hand Checks Non/AP | Total Checks |
|--------------|--|---------------|----------|-----------------|------------------------|----------------|--------------------|----------------|
| | | 10 | 10 | | | | \$14,342.97 | \$14,342.97 |
| | | 10 | 11 | | | \$2,592,952.81 | | \$2,592,952.81 |
| | | Fund 10 | TOTAL | | | \$2,592,952.81 | \$14,342.97 | \$2,607,295.78 |
| | | 20 | 20 | | | \$23,563.58 | | \$23,563.58 |
| | | 40 | 40 | | | \$17,681.25 | | \$17,681.25 |
| | | 60 | 60 | | | \$30,218.19 | | \$30,218.19 |
| | | 65 | 65 | | | \$893.39 | | \$893.39 |
| | | GRAND | TOTAL | \$0.00 | \$0.00 | \$2,665,309.22 | \$14,342.97 | \$2,679,652.19 |

Chairman Finance Committee

Member Finance Committee
