

# Brick Board of Education

## Bills And Claims Report By PO Number

WIRE PAYMENTS: 05/14/20 BOARD MEETING

va\_bill4.102317  
03/31/2020

PO #	Account # / Description	Inv #	Vendor # / Name	Check Type	Check Description or Multi Remit To Check Name	Check #	Check Amount	
<b>Unposted Checks</b>								
<b>NAP Check</b>								
	<b>DB:10-141-02</b>	<b>CR:10-101-</b>						
			8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY	HF	STATE SHARE FICA 4/30/20	888888888	227,310.43	
			8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY	HF	STATE SHARE FICA 4/9/20	888888888	226,999.98	
			<b>Total for NAP Check</b>					<b>\$454,310.41</b>
<b>20-03627</b>								
	<b>11-000-291-220-00-000-000/ Social Security</b>							
			BRD SHARE SS 4/30/20	8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY	HF	Social Security	888888888 62,015.94	
			BRD SHARE SS 4/9/20	8039 / AGENCY ACCT-BRD SHARE SOCIAL SECURITY	HF	Social Security	888888888 61,454.34	
			<b>Total for 20-03627</b>					<b>\$123,470.28</b>
<b>20-04534</b>								
	<b>12-000-400-800-00-000-000/ REDUCTION OF DEBT SERVIC</b>							
			APRIL STATE AID	4576 / NJ DEPT. OF EDUCATION/SCHOOL FUNDING	HF	REDUCTION OF DEBT SERVIC	888888888 3,876.35	
			APRIL 2020 STATE AID	4576 / NJ DEPT. OF EDUCATION/SCHOOL FUNDING	HF	REDUCTION OF DEBT SERVIC	888888888 3,876.35	
			<b>Total for 20-04534</b>					<b>\$7,752.70</b>
<b>20-05133</b>								
	<b>11-000-100-568-99-000-000/ Tuition-State Facilities</b>							
			APRIL STATE AID	1269 / STATE FACILITIES ( VARIOUS LOCATIONS)	HF	Tuition-State Facilities	888888888 2,480.30	
			STATE AID APRIL 2020	1269 / STATE FACILITIES ( VARIOUS LOCATIONS)	HF	Tuition-State Facilities	888888888 2,480.30	
			<b>Total for 20-05133</b>					<b>\$4,960.60</b>
<b>20-05374</b>								
	<b>11-000-291-270-00-003-000/ MEDICAL INSURANCE</b>							
			MARCH 2020 A4 TAX	1900 / HORIZON BLUE CROSS BLUE SHIELD OF NJ	HF	MEDICAL INSURANCE	888888888 53,711.96	
			<b>Total for 20-05374</b>					<b>\$53,711.96</b>
<b>20-07214</b>								
	<b>11-000-291-241-00-002-000/ DCRP AND OTHER RETIREMEN</b>							
			DCRP APRIL 2020	8041 / AGENCY ACCT. - DCRP	HF	OTHER RETIREMENT DCRP	888888888 2,399.03	
	<b>60-910-310-241-67-000-000/ CAFE PENSION</b>							
			DCRP APRIL 2020	8041 / AGENCY ACCT. - DCRP	HF	CAFE PENSION	888888888 1,147.28	
	<b>65-990-330-280-68-000-000/ BEST-PENSION</b>							
			DCRP APRIL 2020	8041 / AGENCY ACCT. - DCRP	HF	BEST-PENSION	888888888 1,097.13	
			<b>Total for 20-07214</b>					<b>\$4,643.44</b>
<b>20-07217</b>								
	<b>11-000-291-241-00-000-000/ Pension Costs</b>							
			ANNUAL PENSION	3499 / STATE OF NJ DIV. OF PENS & BENEF-PERS	HF	Pension Costs	888888888 2,279,975.00	

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

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<b>Unposted Checks</b>							
		CONTR					
					<b>Total for 20-07217</b>		<b>\$2,279,975.00</b>
<b>20-07219</b>							
	<b>11-000-291-270-00-006-000/ OTHER HEALTH INSUR COSTS</b>						
	APRIL LOCAL RETIREE		3579 / STATE OF NJ HEALTH BENEFITS	HF	OTHER HEALTH INSUR COSTS	888888888	2,047.02
					<b>Total for 20-07219</b>		<b>\$2,047.02</b>
<b>20-08173</b>							
	<b>11-000-291-270-00-003-000/ MEDICAL INSURANCE</b>						
	MARCH 2020 H&W ADMIN		8842 / HORIZON BC/BS HEALTH & WELLNESS FEE	HF	MEDICAL INSURANCE	888888888	8,652.50
					<b>Total for 20-08173</b>		<b>\$8,652.50</b>
<b>20-08176</b>							
	<b>11-000-291-270-00-003-000/ MEDICAL INSURANCE</b>						
	MARCH 2020 TPA ADMIN		8843 / HORIZON BC/BS 3RD PARTY ADMIN.	HF	MEDICAL INSURANCE	888888888	36,538.92
					<b>Total for 20-08176</b>		<b>\$36,538.92</b>
<b>20-08398</b>							
	<b>11-000-100-565-99-000-000/ Tuition-CSSD &amp; Regional</b>						
	APRIL STATE AID		1268 / DAY TRAINING	HF	Tuition-CSSD & Regional	888888888	7,768.80
	APRIL 2020 STATE AID		1268 / DAY TRAINING	HF	Tuition-CSSD & Regional	888888888	7,768.80
					<b>Total for 20-08398</b>		<b>\$15,537.60</b>
<b>20-08508</b>							
	<b>11-000-291-270-00-003-000/ MEDICAL INSURANCE</b>						
	CLAIMS 5/1-5/3		8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	123,697.17
	<b>20-218-200-200-99-000-027/ BENEFITS PEEA</b>						
	CLAIMS 5/1-5/3		8844 / HORIZON BC/BS CLAIMS	HF	BENEFITS PEEA	888888888	36,666.85
	<b>60-910-310-270-67-000-000/ CAFE HEALTH BENEFITS</b>						
	CLAIMS 5/1-5/3		8844 / HORIZON BC/BS CLAIMS	HF	CAFE HEALTH BENEFITS	888888888	28,781.97
	<b>65-990-330-270-68-000-000/ HEALTH INSURANCE</b>						
	CLAIMS 5/1-5/3		8844 / HORIZON BC/BS CLAIMS	HF	HEALTH INSURANCE	888888888	3,312.06
	<b>11-000-291-270-00-003-000/ MEDICAL INSURANCE</b>						
	CLAIMS 4/1-4/5/20		8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	299,303.59
	<b>20-218-200-200-99-000-027/ BENEFITS PEEA</b>						
	CLAIMS 4/1-4/5/20		8844 / HORIZON BC/BS CLAIMS	HF	BENEFITS PEEA	888888888	36,666.85
	<b>60-910-310-270-67-000-000/ CAFE HEALTH BENEFITS</b>						
	CLAIMS 4/1-4/5/20		8844 / HORIZON BC/BS CLAIMS	HF	CAFE HEALTH BENEFITS	888888888	30,351.45
	<b>65-990-330-270-68-000-000/ HEALTH INSURANCE</b>						

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<b>Unposted Checks</b>							
		CLAIMS 4/1-4/5/20	8844 / HORIZON BC/BS CLAIMS	HF	HEALTH INSURANCE	888888888	3,505.78
<b>11-000-291-270-00-003-000/</b>	<b>MEDICAL INSURANCE</b>						
		CLAIMS 4/6-4/12/20	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	521,114.65
		CLM/CAP/ANC 3/30-31	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	97,457.86
		CLAIMS 3/23-3/29	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	467,047.33
		CLAIMS 4/13 -4/19/20	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	565,158.10
		CLAIMS 4/20-4/26	8844 / HORIZON BC/BS CLAIMS	HF	MEDICAL INSURANCE	888888888	253,187.87
			<b>Total for 20-08508</b>				<b>\$2,466,251.53</b>
<b>20-08509</b>							
<b>11-000-291-270-00-004-000/</b>	<b>PRESCRIPTION</b>						
		#1472 (3/15-4/1/20)	3644 / BOLLINGER INSURANCE	HF	PRESCRIPTION	888888888	373,710.31
		#1477 (4/1-4/15/20)	3644 / BOLLINGER INSURANCE	HF	PRESCRIPTION	888888888	222,623.18
<b>20-218-200-200-99-000-027/</b>	<b>BENEFITS PEEA</b>						
		#1477 (4/1-4/15/20)	3644 / BOLLINGER INSURANCE	HF	BENEFITS PEEA	888888888	7,669.40
<b>60-910-310-270-67-000-000/</b>	<b>CAFE HEALTH BENEFITS</b>						
		#1477 (4/1-4/15/20)	3644 / BOLLINGER INSURANCE	HF	CAFE HEALTH BENEFITS	888888888	6,395.07
<b>65-990-330-270-68-000-000/</b>	<b>HEALTH INSURANCE</b>						
		#1477 (4/1-4/15/20)	3644 / BOLLINGER INSURANCE	HF	HEALTH INSURANCE	888888888	777.53
			<b>Total for 20-08509</b>				<b>\$611,175.49</b>
					<b>Total for Unposted Checks</b>		<b>\$6,069,027.45</b>

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<b>Posted Checks</b>								
<b>NAP Check</b>								
	<b>DB:60-491-01 CR:60-101-</b>							
			10296 / ROMERO, VIRGINIA	CF	CAFE REFUND ISRAEL	60916	29.05	
			<b>Total for NAP Check</b>					<b>\$29.05</b>
<b>20-04617</b>	<b>11-000-262-622-00-000-000/ ELECTRICITY</b>							
		BRKGEN_308 JAN.2020	9202 / NJR CLEAN ENERGY VENTURES	CF	ELECTRICITY	60915	6,126.45	
			<b>Total for 20-04617</b>					<b>\$6,126.45</b>
<b>20-05057</b>	<b>60-910-310-610-67-000-000/ REIMBURSEABLE FOOD</b>							
		JAN WK 1-4	1472 / CREAM O'LAND DAIRIES	CF	REIMBURSEABLE FOOD	60904	10,958.15	
			<b>Total for 20-05057</b>					<b>\$10,958.15</b>
<b>20-05371</b>	<b>60-910-310-610-67-005-000/ NONREIMBURSABLE FOOD</b>							
		JAN WK 2, 4, 5	8393 / HERSHEY CREAMERY COMPANY	CF	NONREIMBURSABLE FOOD	60910	2,341.80	
			<b>Total for 20-05371</b>					<b>\$2,341.80</b>
<b>20-05660</b>	<b>60-910-310-610-67-001-000/ SUPPLIES PAPER</b>							
		JAN WK 1-5 PAPER	3347 / US FOODSERVICE, INC.	CF	SUPPLIES PAPER	60918	6,502.26	
			<b>Total for 20-05660</b>					<b>\$6,502.26</b>
<b>20-05732</b>	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
		15325576	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	185.50	
			<b>Total for 20-05732</b>					<b>\$185.50</b>
<b>20-05762</b>	<b>60-910-310-610-67-002-000/ SUPPLIES CLEANING</b>							
		JAN WK 1-5 ECOLAB	3347 / US FOODSERVICE, INC.	CF	SUPPLIES CLEANING	60918	1,485.90	
			<b>Total for 20-05762</b>					<b>\$1,485.90</b>
<b>20-06419</b>	<b>60-910-310-610-67-005-000/ NONREIMBURSABLE FOOD</b>							
		WK 1-5 JAN ALACARTE	3347 / US FOODSERVICE, INC.	CF	6	60918	13,077.67	
			<b>Total for 20-06419</b>					<b>\$13,077.67</b>
<b>20-06608</b>	<b>11-150-100-320-99-000-000/ PURCH SVC BEDSIDE</b>							
		INV46731/ INV45973/	1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	910.00	

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<b>Posted Checks</b>							
		INV44975	1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	182.00
<b>Total for 20-06608</b>							<b>1,092.00</b>
<b>20-06623</b>							
<b>20-218-200-200-99-000-027/ BENEFITS PEEA</b>							
	#H8209325 (FEBRUARY)		7573 / AETNA	CF	BENEFITS PEEA	60897	1,482.20
<b>60-910-310-270-67-000-000/ CAFE HEALTH BENEFITS</b>							
	#H8209325 (FEBRUARY)		7573 / AETNA	CF	CAFE HEALTH BENEFITS	60897	1,181.89
<b>11-000-291-270-00-005-000/ DENTAL</b>							
	#H8209325 (FEBRUARY)		7573 / AETNA	CF	DENTAL	60897	93,875.52
<b>65-990-330-270-68-000-000/ HEALTH INSURANCE</b>							
	#H8209325 (FEBRUARY)		7573 / AETNA	CF	HEALTH INSURANCE	60897	27.40
<b>Total for 20-06623</b>							<b>\$96,567.01</b>
<b>20-07037</b>							
<b>11-219-100-320-99-000-000/ BEDSIDE -CLASSIFIED STUD</b>							
		INV47896	1643 / LEARNWELL	CF	BEDSIDE -CLASSIFIED STUD	60911	91.00
<b>Total for 20-07037</b>							<b>\$91.00</b>
<b>20-07101</b>							
<b>60-910-310-610-67-000-000/ REIMBURSEABLE FOOD</b>							
	JAN WK 4-5		3347 / US FOODSERVICE, INC.	CF	REIMBURSEABLE FOOD	60918	18,603.30
<b>Total for 20-07101</b>							<b>\$18,603.30</b>
<b>20-07226</b>							
<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	V11135302/ V11214296		2317 / MAXIM HEALTHCARE SERVICE	CF	OTHER SVC.SUP.EXTRA-ORD.	60912	2,955.50
	V11248703/ V11287867		2317 / MAXIM HEALTHCARE SERVICE	CF	OTHER SVC.SUP.EXTRA-ORD.	60912	2,645.00
	V11327269		2317 / MAXIM HEALTHCARE SERVICE	CF	OTHER SVC.SUP.EXTRA-ORD.	60912	1,288.00
<b>Total for 20-07226</b>							<b>\$6,888.50</b>
<b>20-07234</b>							
<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15242564/ 15262548		5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	938.00
	15283454/ 15283455		5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	853.50
	15304277/ 15304278/		5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	677.25
	15325173		5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	421.25
<b>Total for 20-07234</b>							<b>\$2,890.00</b>
<b>20-07235</b>							
<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							

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Run on 05/08/2020 at 11:28:18 AM

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<b>Posted Checks</b>							
		15242565/ 15262550	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	1,650.00
		15283457/ 15304280	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	2,970.00
		15325176	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	1,650.00
			<b>Total for 20-07235</b>				<b>\$6,270.00</b>
<b>20-07236</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15283470/ 15242574	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	404.00
		15283471/ 15262562	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	920.75
		15283472/ 15304292	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	848.00
		15325187/ 15304293	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	788.00
		15325188	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	596.00
			<b>Total for 20-07236</b>				<b>\$3,556.75</b>
<b>20-07237</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15242767/ 15262844	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	1,569.50
		15283762/ 15304570	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	2,408.00
		15325476	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	1,053.50
			<b>Total for 20-07237</b>				<b>\$5,031.00</b>
<b>20-07242</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15242783/ 15262866	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	1,547.50
		15283783/ 15304590	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	1,735.50
		15325496	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60899	1,079.75
			<b>Total for 20-07242</b>				<b>\$4,362.75</b>
<b>20-07245</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15262892/ 15242800	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60900	192.00
		15262893/ 15283814	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60900	808.00
		15304623/ 15325525	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60900	510.00
			<b>Total for 20-07245</b>				<b>\$1,510.00</b>
<b>20-07246</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15274623/ 152995453	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60900	212.00
		15337291	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60900	212.00

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Page 6

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<b>Posted Checks</b>								
<b>Total for 20-07246</b>								<b>\$424.00</b>
<b>20-07250</b>								
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15242889/ 15263035		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60900	1,424.00
	15325674/ 15304753		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60900	662.00
	15325675		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60900	828.00
<b>Total for 20-07250</b>								<b>\$2,914.00</b>
<b>20-07252</b>								
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15242890/ 15263037		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60900	2,053.25
	15283949/ 15304755		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60900	2,576.25
	15325677		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60900	1,053.50
<b>Total for 20-07252</b>								<b>\$5,683.00</b>
<b>20-07253</b>								
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15274267/ 15295100		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	1,548.00
	15315964/ 15336949		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	989.00
<b>Total for 20-07253</b>								<b>\$2,537.00</b>
<b>20-07255</b>								
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15284024/ 15263122		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	404.00
	15284025/ 15304831		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	622.00
	15325751/ 15325752		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	788.00
<b>Total for 20-07255</b>								<b>\$1,814.00</b>
<b>20-07257</b>								
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15242949/ 15263123		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	808.00
	15284028/ 15325754		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60902	596.00
	15325755/ 15304833		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60902	404.00
	15325756		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60902	424.00
<b>Total for 20-07257</b>								<b>\$2,232.00</b>
<b>20-07259</b>								
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>							
	15058187/ 15079144		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	2,300.50
	15100018/ 15121091		5055 / BAYADA HOME HEALTH CARE	CF		OTHER SVC.SUP.EXTRA-ORD.	60901	1,677.00

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

# Brick Board of Education

## Bills And Claims Report By PO Number

va\_bill4.102317  
03/31/2020

**WIRE PAYMENTS: 05/14/20 BOARD MEETING**

PO #	Account # / Description	Inv #	Vendor # / Name	Check Type *	Check Description or Multi Remit To Check Name	Check #	Check Amount
<b>Posted Checks</b>							
		15162216/ 15183119	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60901	602.00
		15204311/ 15283989	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60901	1,752.25
		15304795	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60901	268.75
			<b>Total for 20-07259</b>				<b>\$6,600.50</b>
<b>20-07286</b>							
	<b>11-402-100-800-44-000-020/ BTHS ATHLETICS DUES/FEES</b>						
		PETE PANUSKA CONF RE	1507 / DAANJ, INC.	CF	BTHS ATHLETICS DUES/FEES	60906	375.00
			<b>Total for 20-07286</b>				<b>\$375.00</b>
<b>20-07330</b>							
	<b>60-910-310-610-67-005-000/ NONREIMBURSABLE FOOD</b>						
		1244616	3347 / US FOODSERVICE, INC.	CF	NONREIMBURSABLE FOOD	60918	135.07
			<b>Total for 20-07330</b>				<b>\$135.07</b>
<b>20-07358</b>							
	<b>60-910-310-610-67-001-000/ SUPPLIES PAPER</b>						
		1244617	3347 / US FOODSERVICE, INC.	CF	SUPPLIES PAPER	60918	723.59
			<b>Total for 20-07358</b>				<b>\$723.59</b>
<b>20-07461</b>							
	<b>11-150-100-320-99-000-000/ PURCH SVC BEDSIDE</b>						
		INV48924	1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	91.00
			<b>Total for 20-07461</b>				<b>\$91.00</b>
<b>20-07508</b>							
	<b>11-150-100-320-99-000-000/ PURCH SVC BEDSIDE</b>						
		INV48927/ INV19765	1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	273.00
			<b>Total for 20-07508</b>				<b>\$273.00</b>
<b>20-07514</b>							
	<b>11-000-100-566-99-000-000/ TUITION-PRIVATE SCH</b>						
		0040861-IN	2520 / NEW ROAD SCHOOLS OF NEW JERSEY	CF	TUITION-PRIVATE SCH	60914	4,576.50
			<b>Total for 20-07514</b>				<b>\$4,576.50</b>
<b>20-07515</b>							
	<b>20-250-100-300-99-000-000/ NONPUBLIC PURCH SVC</b>						
		COIDEAB_Q0219	8762 / EDUCATIONAL SERVICES COMMISSION OF NJ	CF	NONPUBLIC PURCH SVC	60908	1,482.08
			<b>Total for 20-07515</b>				<b>\$1,482.08</b>
<b>20-07521</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						

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# Brick Board of Education

## Bills And Claims Report By PO Number

va\_bill4.102317  
03/31/2020

**WIRE PAYMENTS: 05/14/20 BOARD MEETING**

PO #	Account # / Description	Inv #	Vendor # / Name	Check Type	Check Description or Multi Remit To Check Name	Check #	Check Amount
<b>Posted Checks</b>							
		15263034	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	86.00
			<b>Total for 20-07521</b>				<b>\$86.00</b>
<b>20-07535</b>	<b>11-000-100-566-99-000-000/ TUITION-PRIVATE SCH</b>						
	OCTOBER 1-15 (GLC)		1385 / CHILDREN'S CENTER OF MONMOUTH COUNTY	CF	TUITION-PRIVATE SCH	60903	3,114.20
			<b>Total for 20-07535</b>				<b>\$3,114.20</b>
<b>20-07549</b>	<b>11-402-100-580-46-000-025/ BMHS ATHLETIC TRAVEL</b>						
	ED SARLUCA CONF REG 1507 / DAANJ, INC.			CF	BMHS ATHLETIC TRAVEL	60906	255.00
	<b>11-402-100-800-46-001-025/ BMHS ATHLETICS DUES/FEES</b>						
	ED SARLUCA CONF REG 1507 / DAANJ, INC.			CF	BMHS ATHLETICS DUES/FEES	60906	120.00
			<b>Total for 20-07549</b>				<b>\$375.00</b>
<b>20-07574</b>	<b>11-150-100-320-99-000-000/ PURCH SVC BEDSIDE</b>						
	INV48324/ INV48926		1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	409.50
	INV49764/ INV50294		1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	455.00
	INV51424		1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	227.50
			<b>Total for 20-07574</b>				<b>\$1,092.00</b>
<b>20-07648</b>	<b>11-000-262-621-00-000-000/ NATURAL GAS</b>						
	ACT# 2088-240713		7641 / SUBURBAN PROPANE	CF	NATURAL GAS	60917	1,408.10
			<b>Total for 20-07648</b>				<b>\$1,408.10</b>
<b>20-07649</b>	<b>11-000-270-503-66-001-000/ Trans-Aid in Lieu</b>						
	AID IN LIEU TRANSP		9317 / CUSHMAN, MURIEL	CF	Trans-Aid in Lieu	60905	500.00
			<b>Total for 20-07649</b>				<b>\$500.00</b>
<b>20-07677</b>	<b>11-219-100-320-99-000-000/ BEDSIDE -CLASSIFIED STUD</b>						
	INV48925		1643 / LEARNWELL	CF	BEDSIDE -CLASSIFIED STUD	60911	364.00
			<b>Total for 20-07677</b>				<b>\$364.00</b>
<b>20-07678</b>	<b>11-219-100-320-99-000-000/ BEDSIDE -CLASSIFIED STUD</b>						
	INV49763/ INV50293		1643 / LEARNWELL	CF	BEDSIDE -CLASSIFIED STUD	60911	364.00
			<b>Total for 20-07678</b>				<b>\$364.00</b>
<b>20-07755</b>							

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# Brick Board of Education

## Bills And Claims Report By PO Number

va\_bill4.102317  
03/31/2020

**WIRE PAYMENTS: 05/14/20 BOARD MEETING**

PO #	Account # / Description	Inv #	Vendor # / Name	Check Type	Check Description or Multi Remit To Check Name	Check #	Check Amount
<b>Posted Checks</b>							
	<b>11-150-100-320-99-000-000/ PURCH SVC BEDSIDE</b>						
		INV49762/ INV50292	1643 / LEARNWELL	CF	PURCH SVC BEDSIDE	60911	364.00
					<b>Total for 20-07755</b>		<b>\$364.00</b>
<b>20-07760</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15283946	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	106.00
					<b>Total for 20-07760</b>		<b>\$106.00</b>
<b>20-07761</b>							
	<b>11-000-217-320-99-000-000/ OTHER SVC.SUP.EXTRA-ORD.</b>						
		15284027	5055 / BAYADA HOME HEALTH CARE	CF	OTHER SVC.SUP.EXTRA-ORD.	60898	106.00
					<b>Total for 20-07761</b>		<b>\$106.00</b>
<b>20-07781</b>							
	<b>11-000-219-320-99-000-000/ SPEC.SVS. PURCH.PROF.SVS</b>						
		200788896	6098 / DELTA- T GROUP NORTH JERSEY, INC.	CF	SPEC.SVS. PURCH.PROF.SVS	60907	500.00
					<b>Total for 20-07781</b>		<b>\$500.00</b>
<b>20-07785</b>							
	<b>12-000-400-600-00-000-000/ SUPPLIES AND MATERIALS</b>						
		2020-8786	8927 / NETTA ARCHITECTS, LLC	CF	SUPPLIES AND MATERIALS	60913	35.00
					<b>Total for 20-07785</b>		<b>\$35.00</b>
<b>20-07786</b>							
	<b>12-000-400-600-00-000-000/ SUPPLIES AND MATERIALS</b>						
		2020-8789	8927 / NETTA ARCHITECTS, LLC	CF	SUPPLIES AND MATERIALS	60913	35.75
					<b>Total for 20-07786</b>		<b>\$35.75</b>
<b>20-07977</b>							
	<b>11-000-230-610-00-001-000/ Bd Secr-Supplies</b>						
		BOARD OFFICE PC REPL 7622 / GOMES, CARRIE/PETTY CASH		CF	Bd Secr-Supplies	60909	45.00
	<b>11-000-251-610-00-000-000/ Business Off-Supplies</b>						
		BOARD OFFICE PC REPL 7622 / GOMES, CARRIE/PETTY CASH		CF	Business Off-Supplies	60909	49.99
	<b>11-000-230-610-03-000-000/ CENTRAL OFFICE SUPPLIES</b>						
		BOARD OFFICE PC REPL 7622 / GOMES, CARRIE/PETTY CASH		CF	CENTRAL OFFICE SUPPLIES	60909	135.54
					<b>Total for 20-07977</b>		<b>\$230.53</b>
					<b>Total for Posted Checks</b>		<b>\$226,110.41</b>

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# Brick Board of Education

## Bills And Claims Report By PO Number

va\_bill4.102317

03/31/2020

**WIRE PAYMENTS: 05/14/20 BOARD MEETING**

*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				\$454,310.41	\$454,310.41
	10	11	\$168,009.30		\$5,450,592.97		\$5,618,602.27
	10	12	\$70.75		\$7,752.70		\$7,823.45
	Fund 10	TOTAL	\$168,080.05		\$5,458,345.67	\$454,310.41	\$6,080,736.13
	20	20	\$2,964.28		\$81,003.10		\$83,967.38
	60	60	\$55,009.63	\$29.05	\$66,675.77		\$121,714.45
	65	65	\$27.40		\$8,692.50		\$8,719.90
	GRAND	TOTAL	\$226,081.36	\$29.05	\$5,614,717.04	\$454,310.41	\$6,295,137.86

**Chairman Finance Committee**

**Member Finance Committee**

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