Bills And Claims Report By PO Number for Batch 52

03/13/2025 va_bill4.102317

Account # / Description mv # Vendor# / No Check Check Description or

Account # / Description Inv #	Vendor# / Name	Type * Multi Remit To Check Name)
Pending Payments			Cilect # Cilect Amount
25-00529			
11-000-216-320-01-19/ CONTRACTED RELATED SERVI	?\!		
157099FB1135	387945/ PREFERRED HOME HEALTH CARE & NURSING CF	F CONTRACTED RELATED SERVI	3,696.00
157071FB1083	387945/ PREFERRED HOME HEALTH CARE & NURSING CF SERVICES INC. / CARE OPTIONS FOR KIDS	CONTRACTED RELATED SERVI	5,376.00
25-00531	Total for 25-00529		\$9,072.00
11-000-216-320-01-19/ CONTRACTED RELATED SERVI	VI		
70	388020/ MOM AND DAD CARE HOME HEALTH PC CF	CONTRACTED RELATED SERVI	
71			9,392.00
72	388020/ MOM AND DAD CARE HOME HEALTH PC CF		9,047.00
25-00532	Total for 25-00531		\$28,449.00
11-000-219-320-01-19/ CONTR CST EVALS			
242576	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175 00
2425/7	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242578	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242580	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242581	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
2.42502	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
2 42 25 83	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242584	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242585	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242586	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242587	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
242588	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
252579	386468/ FAMILY CENTER AT MONTCLAIR LLC CF	CONTR CST EVALS	175.00
25-00533	Total for 25-00532		\$2,275.00
11-000-219-320-01-19/ CONTR CST EVALS			
5998	387731/ NJ NEUROLOGY INC. CF	CST Evaluation	
6045	387731/ NJ NEUROLOGY INC. CF	CST Evaluation	600.00
* CF Computer Full CP - Computer Partial UE Used Ct - LE			

^{*}CF--- Computer Full CP - Computer Partial HF - Hand Check Full HP - Hand Check Partial Run on 03/13/2025 at 02:16:02 PM

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PO #	#ioo		Check Check Description or	
Pending Payments			Type Mulu Reillit to Check Name	Check # Check Amount
	6046	387731/ NJ NEUROLOGY INC.	GE CST Evaluation	
	6047	387731/ NJ NEUROLOGY INC.		600.00
25-00536		Total for 25	r 25-00533	\$2,400.00
11-000-219-320-01-19-	-/ CONTR CST EVALS			
	1/14/25 EVAL - JB	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	875 00
	1/16/2025 EVAL - AB	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	875.00
	1/28/2025 EVAL - DL	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	675.00
	2/13/2025 EVAL - KN	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	675.00
	2/18/2025 EVAL - AJ	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	675.00
	2/4/2025 EVAL - EM	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	675.00
	2/5/2025 EVAL - (E	387352/ MARILYN A. KUBICHEK, MD, LLC	CF CONTR CST EVALS	675.00
25-00538		Total for 25	25-00536	\$4,725.00
11-000-219-320-01-19-	-/ CONTR CST EVALS			
25-00539	0372	388243/ TECHABILITIES CONSULTING, LLC	CF CONTR CST EVALS	1,000.00
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
	4976472	386664/ EPIC HEALTH SERVICES, INC. / AVEANNA HEALTHCARE	CF CONTRACTED RELATED SERVI	5,400.00
	4997575	386664/ EPIC HEALTH SERVICES, INC. / AVEANNA HEALTHCARE	CF CONTRACTED RELATED SERVI	5,850.00
25-00543		Total for 25-	25-00539	\$11,250.00
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
	482145	387681/ STARLIGHT HOMECARE AGENCY / STAR PEDIATRIC	CF CONTRACTED RELATED SERVI	5,310.00
	482151	387681/ STARLIGHT HOMECARE AGENCY / STAR PEDIATRIC	CF CONTRACTED RELATED SERVI	5,648.25
25-00546		Total for 25-00543	10543	\$10,958.25
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
*) 1	1250002655	386873/ ATC HEALTHCARE SERVICES LLC	CF CONTRACTED RELATED SERVI	4,719.88

^{*} CF -- Computer Full CP - Computer Partial HF - Hand Check Full HP - Hand Check Partial

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PO #			OFFICE OFFICE DESCRIPTION OF	
Account # / Description	tion Inv#	Vendor# / Name	Type * Multi Remit To Check Name	Check # Check Amount
Pending Payments				
	1250003246	386873/ ATC HEALTHCARE SERVICES LLC	CE CONTRACTED RELATED SERVI	
	1250003662	386873/ ATC HEALTHCARE SERVICES LLC		4,561.75
	1250004045	386873/ ATC HEALTHCARE SERVICES LLC		3,847.25
	1250002105	386873/ATC HEALTHCARE SERVICES LLC		4.616.50
25-00674		Total for 25-00546		\$21,848.38
11-000-219-320-01-19-	-/ CONTR CST EVALS			
25-00675	EVAL - KD	388148/ DR. DEBORA L. BUZINKAI, LLC	CF CONTR CST EVALS	3,200.00
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
25-00687	01014	388208/ REACH HEALTH SERVICES LLC	CF CONTRACTED RELATED SERVI	4,487.62
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
	2253	388169/ NORTH JERSEY BEHAVIORAL HEALTH	CF CONTRACTED RELATED SERVI	20,400.00
25-01349				
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
25-01760	5737	388308/ GRAHAM BEHAVIOR SERVICES LLC	CF CONTRACTED RELATED SERVI	680.00
11-000-219-320-01-19-	-/ CONTR CST EVALS			
25-01799	EUN2501	387862/ KID CLAN SERVICES, INC.	CF CONTR CST EVALS	1,650.00
11-000-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
	BT-JAN-25	382158/ OUR HOUSE, INC.	CF CONTRACTED RELATED SERVI	4 499 00
	CH-JAN-25	382158/ OUR HOUSE, INC.		4 005 00
	LB-JAN-25	382158/ OUR HOUSE, INC.	CF CONTRACTED RELATED SERVI	5 230 00
	OS-JAN-25			4 338 00
	WJ-JAN-25	382158/ OUR HOUSE, INC.		4,077.00
25-01856		Total for 25-01799	99	\$22,149.00
0-216-320-01-19-	-/ CONTRACTED RELATED SERVI			
	CBIPGM - 2.11.2025	387561/ YMCA- YOUNG MEN'S CHRISTIAN ASSOC. UC / CF	CF JANUARY, FEBRUARY& MARCH 2025	435.00
		GATEWAY FAMILY YMCA		

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GATEWAY FAMILY YMCA

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\$167,028.85	ing Payments	Total for Pending Payments				
550.00		CONTR CST EVALS	유	328725/ SUMMIT SPEECH SCHOOL		
					-/ CONTR CST EVALS	11-000-219-320-01-19/ CONTR CST EVALS
\$1,200.00			for 25-02094	Total for		25-02095
400.00		CONTRACTED RELATED SERVI	유유	383695/ BAYADA HOME HEALTH CARE, INC. 383695/ BAYADA HOME HEALTH CARE, INC.	56405FB1943 62004FC1782	
200		CONTRACTED RELATED SERVI	유	383695/ BAYADA HOME HEALTH CARE, INC.	11-000-216-320-01-19/ CONTRACTED RELATED SERVI 51502FB1745	11-000-216-320-01-19-
20,299.60		CONTRACTED RELATED SERVI	CF	219450/ MORRIS UNION JOINTURE COMM.	11-000-216-320-01-19/ CONTRACTED RELATED SERVI 37292 02094	11-000-216-320-01-19- 25-02094
						Pending Payments 25-02030
Check # Check Amount	Check#	Check Check Description or Type * Multi Remit To Check Name	Che Typ	Vendor# / Name	on Inv#	PO# Account#/Description

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BOARD OF EDUCATION TOWNSHIP OF UNION Bills And Claims Report By PO Number

for Batch 52

Fund Summary Fund be approved for payment and further that the Secretary's and Treasurer's financial reports be accepted as filed. Resolution that the list of claims for goods received and services rendered and certified to be correct by the Business Administrator,

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\$167,028.85	\$0.00	\$0.00	\$0.00	\$167,028.85	TOTAL	GRAND TOTAL	
\$167,028.85				\$167,028.85	=		
CHECKS				9101	7	10	
Charles	Checks Non/AP	Checks	Checks Non/AP	Checks	runa	Category	
Total	Hand	Hand	Computer	Computer	oub -		Carrier y Fulld

Chairman Finance Committee

Member Finance Committee