Report of the Claims Auditor

Date of Report: 3/8/2019 Warrant #0053

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Claims held for additional information:						
Premier Martial Arts LLC	9/14/2019	N/A	F-G19-2110-400-18-21ST	7,500.00	We are paying per "unit" according to the contract, but there are no dates of service provided on the invoice.	dates of service required prior to payment
Claims Rejected:						

The above information is being reported to you as part of the duties of the claims auditor.

(signature)

Note: Observations by Claims Auditor will be in a Quartly Report.

Report of the Claims Auditor

Date of Report: 3/8/2019 Warrant #0054

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action

Claims which had minor deficiencies however approved by the claims auditor:

Claims held for additional information:

Claims Rejected:

- No findings to report -

The above information is being reported to you as part of the duties of the claims auditor.

(signature)

Note: Observations by Claims Auditor will be in a Quartly Report.

Report of the Claims Auditor

Date of Report: 3/15/2019 Warrant #0056

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Angeltrax Northeast	3/4/2019	139526	A-5510-400-06-1000	500.00	Invoice is dated 11/7/18, PO dated 3/4/19	PO dated before invoice
Claims held for additional information:						
Wellness Coordinated	8/31/2018	N/A	F-G19-2110-400-18-21ST	1,400.00	Unit cost on PO is $100, unit cost on invoice is $200	Need clarification prior to processing
Claims Rejected:						

The above information is being reported to you as part of the duties of the claims auditor.

(signature)

Note: Observations by Claims Auditor will be in a Quartly Report.

Report of the Claims Auditor

Date of Report: 3/29/2019 Warrant #0058

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Joseph Fantigrossi	3/20/2019	2190	Q19-2110-460-19-PBIS	1,512.91	No PO	
Reading Recovery	3/1/2019	139582	A-2010-400-05-2000	70.00	Invoice dated 8/30/18, PO dated 3/1/19	PO should be issued before invoice received
Claims held for additional information:						
Research Works, Inc.	10/10/2018	N/A	F-C19-2510-400-18-PREK & other grant codes	9,250.00	Dates/hours of service not provided. Per agreement, we are charged by the hour so dates of service/hours per day should be stated on invoice.	Need specifics prior to payment
Claims Rejected:						

The above information is being reported to you as part of the duties of the claims auditor.

Note: Observations by Claims Auditor will be in a Quartly Report.

(signature)

Report of the Claims Auditor

Date of Report: 4/5/2019 Warrant #0059

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
RCSD	3/26/2019	139633	A-2110-400-05-1000	2,365.44	No PO	
Superior Lubricants	3/4/2019	139637	A-5510-450-06-3600	902.00	PO (3/4) issued after invoice (1/25) received	
Claims held for additional information:						
Claims Rejected:						

The above information is being reported to you as part of the duties of the claims auditor.

Lisa M Cook

(signature)

Note: Observations by Claims Auditor will be in a Quartly Report.