Report of the Claims Auditor

Date of Report: 10/18/2019 Warrant #0029

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Landpro Equipment	7/11/2019	140634	A-1620-450-05-0000	192.42	invoice for $10.87 included in paperwork but not in total payment.	Amount added to total.
Unishippers	8/1/2019	140658	various	602.57	incorrect amount paid on invoice 1016319792	changed amount
Claims held for additional information:						
Claims Rejected:						
B&H Photo	8/1/2019	N/A	A-2110-200-04-0015	-103.00	Invoice for $975.00 not signed/authorized	sent back for signature
Jordan Camp	9/12/2019	N/A	A-2110-400-05-4200	1,386.00	not signed/authorized by S. Vigliotti	sent back for signature

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: 10/18/2019 Warrant #0030

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Irene Interlichia	8/7/2019	2368	F-E20-2110-450-20-HMLS	272.83	OK to pay shipping. For M-V grant, not part of Unishippers agreement	added $7 shipping charge back to total
Claims held for additional information:						
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: 10/18/2019 Warrant #0031

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.

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

(signature)

Report of the Claims Auditor

Date of Report: 10/25/2019 Warrant #0032

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.

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

(signature)

Report of the Claims Auditor

Date of Report: 10/25/2019 Warrant #0033

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Upstate Niagara Coop	8/15/2019	12550	C-2860-414-05-0000	6,027.23	Payment was more than invoice amount	Notified Donna and changed total back to $6027.07.
Wegman's Food Markets	9/12/2019	12551	C-2860-414-05-0000	306.34	PO for $300, invoice for $306.34 - authorization to increase PO needed prior to processing payment	Authorization received but not included in paperwork.
Claims held for additional information:						
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: 10/25/2019 Warrant #0034

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.

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

(signature)

Report of the Claims Auditor

Date of Report: 10/25/2019 Warrant #0036

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: 11/1/2019 Warrant #0038

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
School of the Holy Childhood	7/1/2019	140767	A-2250-470-05-0000	1,665.00	$166.50 was authorized to pay, not 1665.00	adjusted payment to 166.50
Claims held for additional information:						
Time for Kids	6/26/2019	N/A	A-2110-450-03-0000	1,350.00	no signature authorizing payment	returned for signature
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: 10/25/2019 Warrant #0035

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.

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

(signature)

Report of the Claims Auditor

Date of Report: 11/1/2019 Warrant #0039

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.

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

(signature)

Report of the Claims Auditor

Date of Report: 11/1/2019 Warrant #0040

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: 11/1/2019 Warrant #0041

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.