Report of the Claims Auditor

Date of Report: 3/27/2020 Warrant #0124

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Matthews Buses	7/11/2019	141466	A-5510-450-06-3600	2,199.37	R Galloway authorized inv 7038:01 for $103.02, not $171.62	Adjust total to $2130.77, then ok to pay
Michele Bartholomew	3/3/2020	141447	A-2010-400-05-4000	477.59	We don't pay NYS Sales Tax which was included in hotel charges	Adjust total to $447.80, then ok to pay. Employee can bring tax exempt form to hotel in future.
Claims held for additional information:						
Robyn Roberts-Grant	3/9/2020	N/A	A-2110-450-05-0000	220.63	Robyn can't authorize her own reimburse-ment. Needs to be signed by supervisor	Sent back to A/P for correction
Plassche Lumber	7/8/2019	N/A	A-1620-450-05-0000	86.67	inv 407384 for $14.99 included in paperwork, but not in total	Sent back to A/P Need clarification as to whether or not invoice should be paid
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 Quarterly Report.

Report of the Claims Auditor

Date of Report: 3/27/2020 Warrant #0125

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:						
Upstate Niagara Coop	12/16/2019	N/A	C-2860-414-05-0000	4,576.55	Inv 553885 for $1566.65 not signed by D. Riviello	sent back to A/P 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 Quarterly Report.

(signature)

Report of the Claims Auditor

Date of Report: 3/27/2020 Warrant #0126

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.

Lisa M. Cash

(signature)

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

Report of the Claims Auditor

Date of Report: 3/27/2020 Warrant #F024 Special Aid Fund

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:						
Wayne Cty Action	10/3/2019	N/A	F-C20-2510-400-20-PREK	8,098.99	Need January's list of students; paying by the student for 4 yr old class	Sent back to A/P for list
Irene Interlichia	1/20/2020	N/A	F-E20-2110-450-20-HMLS	40.99	Need Student ID# prior to payment	Sent back to A/P for info
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 Quarterly Report.

Report of the Claims Auditor

Date of Report: 3/30/2020 Warrant #0127

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:

- No findings to report -

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 Quarterly Report.

Report of the Claims Auditor

Date of Report: 4/6/2020 Warrant #0129

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Hillyard Inc	3/12/2020	141491	A-1620-450-05-0000	3,578.86	invoice 700419520 does not match prices listed on PO	adjust total to $3550.70 and ok to pay
Claims held for additional information:						
Michael Flaherty	2/19/2020	N/A	A-2010-400-05-4000	499.48	need hotel bill to show that NYS tax was not paid. Cannot use credit card statement.	returned to A/P to obtain hotel bill from employee.
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 Quarterly Report.

(signature)

Report of the Claims Auditor

Date of Report: 4/6/2020 Warrant #0130

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Wayne CAP	9/26/2019	2476	F-G20-2110-400-20-21ST	4,000.00	invoice 7136 is for $8000, not $4000	changed to $8000 and ok to pay
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 Quarterly Report.

(signature)

Report of the Claims Auditor

Date of Report: 4/10/2020 Warrant #0132

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Day Automation	5/18/2018	700	H-CAP-1620-293-02-PR17	21,762.36	amount approved on pay app #14 is $7206.63, not $7206.93	changed total to $21762.06 and ok to pay
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 Quarterly Report.

Report of the Claims Auditor

Date of Report: 4/24/2020 Warrant #0134

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Energy Cooperative	8/12/2019	141511	A-1620-400-01-1300	5,488.27	"current balance" of all invoices = $4971.54 "previous balance" = $5490.00; total to be paid does not equal either	total adjusted to $5490, then ok to pay
Monroe Cty School Bd	2/17/2020	141524	A-1010-400-05-4000	50 00	conference request form not attached, but included by T Fuller	notified A/P that conf req form must be attached to PO
Mail Finance Inc	4/14/2020	141522	A-1310-400-05-700	194.87	$194.87 paid in late fees and finance charges	we need to pay on time or request waiver of fees
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 Quarterly Report.

Report of the Claims Auditor

Date of Report: 4/24/2020 Warrant #0135

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:

- No findings to report -

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 Quarterly Report.

(signature)

Report of the Claims Auditor

Date of Report: 4/24/2020 Warrant #0136

Vendor Name	Date	Check Number	Coding/Department	Amount	Reason	Corrective Action
Claims which had minor deficiencies however approved by the claims auditor:						
Clinical Assoc of F.L.	2/17/2020	2478	F-120-2250-400-20-1611	12,125.00	invoice dated 9/25/19; PO dated 2/17/20	PO before invoice
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 Quarterly Report.

(signature)

Report of the Claims Auditor

Date of Report: 4/24/2020 Warrant #0137

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 Quarterly Report.

(signature)