

KMR1
11/30/20 8:48AM

Aitkin County

Audit List for Board MANUAL WARRANTS/VOIDS/CORRECTIO



Print List in Order By: 1
1 - Fund (Page Break by Fund)
2 - Department (Totals by Dept)
3 - Vendor Number
4 - Vendor Name

Medical FSA Claims

Explode Dist. Formulas Y

Paid on Behalf Of Name
on Audit List?: N

Type of Audit List: D
D - Detailed Audit List
S - Condensed Audit List

Save Report Options?: N

Aitkin County



Audit List for Board MANUAL WARRANTS/VOIDS/CORRECTIO

KMR1
11/30/20 8:48AM
1 General Fund

<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Descripti</u>	<u>1099</u>
<u>No. Account/Formula</u>	<u>Accr</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>	
8410 Bremer Bank					
1 01-044-904-0000-6360	569.08	Med FSA Claims 2020	39622621	Flex Plan Withdrawals	N
8410 Bremer Bank	569.08	1 Transactions			
1 Fund Total:	569.08	General Fund	1 Vendors	1 Transactions	
Final Total:	569.08	1 Vendors	1 Transactions		

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Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
1	569.08	General Fund
All Funds	569.08	Total

Approved by,
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