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WLC1  
8/26/20 10:53AM

# Aitkin County



Audit List for Board MANUAL WARRANTS/VOIDS/CORRECTION

Page 1

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

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

WLC1  
 8/26/20 10:53AM  
 1 General Fund

# Aitkin County



Audit List for Board MANUAL WARRANTS/VOIDS/CORRECTIO]

<u>Vendor</u>	<u>Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Descripti</u>	<u>1099</u>
<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>	
	<b>8410 Bremer Bank</b>					
1	01-044-904-0000-6360		446.68	Dep Care FSA Claims	39530342	Flex Plan Withdrawals N
2	01-044-904-0000-6360		822.26	Med FSA Claims	39530342	Flex Plan Withdrawals N
	<b>8410 Bremer Bank</b>		1,268.94			
				2 Transactions		
<b>1 Fund Total:</b>			1,268.94	<b>General Fund</b>	<b>1 Vendors</b>	<b>2 Transactions</b>
<b>Final Total:</b>			1,268.94	<b>1 Vendors</b>	<b>2 Transactions</b>	

# Aitkin County



Audit List for Board MANUAL WARRANTS/VOIDS/CORRECTIONS

**Recap by Fund**

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
1	1,268.94	General Fund
<b>All Funds</b>	<b>1,268.94</b>	<b>Total</b>

Approved by,

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