

Aitkin County



Audit List for Board **MANUAL WARRANTS/VOIDS/CORRECTIONS**

KMR1
3/24/21 9:43AM
1 General Fund

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description	1099
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name	
8410	Bremer Bank					
4	01-044-904-0000-6231		Participant Fees - March	15596412	Flex Services, Labor, Etc	N
1	01-044-904-0000-6360		Dep Care FSA Claims 2021	39754008	Flex Plan Withdrawals	N
2	01-044-904-0000-6360		Med FSA Claims 2021	39754008	Flex Plan Withdrawals	N
3	01-044-904-0000-6360		Med FSA Claims 2020	39754008	Flex Plan Withdrawals	N
8410	Bremer Bank		1,916.87		4 Transactions	
1 Fund Total:			1,916.87	General Fund	1 Vendors	4 Transactions
Final Total:			1,916.87	1 Vendors	4 Transactions	

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Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
1	1,916.87	General Fund
All Funds	1,916.87	Total

Approved by, _____

