

KMR1
3/21/23

1:45PM

Aitkin County

2J



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

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

Aitkin County



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

1 General Fund

| Vendor No. | Name Account/Formula | Rpt Accr | Amount | Warrant Description Service Dates | Invoice # Paid On Bhf # | Account/Formula Description On Behalf of Name | 1099 |
|-------------------------|-------------------------|-------------|-----------------|--------------------------------------|----------------------------|--|------|
| 8410 Bremer Bank | | | | | | | |
| 1 | 01-044-904-0000-6360 | | 3.83 | MED FSA CLAIMS 2023 | 03182023 | Flex Plan Withdrawals | N |
| 2 | 01-044-904-0000-6360 | | 99.96 | MED FSA CLAIMS 2023 | 03192023 | Flex Plan Withdrawals | N |
| 3 | 01-044-904-0000-6360 | | 1,458.38 | DEP CARE FSA CLAIMS 2023 | 03202023 | Flex Plan Withdrawals | N |
| 4 | 01-044-904-0000-6360 | | 33.10 | MED FSA CLAIMS 2023 | 03202023 | Flex Plan Withdrawals | N |
| 8410 Bremer Bank | | | 1,595.27 | 4 Transactions | | | |
| 1 Fund Total: | | | 1,595.27 | General Fund | 1 Vendors | 4 Transactions | |
| Final Total: | | | 1,595.27 | 1 Vendors | 4 Transactions | | |

Aitkin County



Recap by Fund

| <u>Fund</u> | <u>AMOUNT</u> | <u>Name</u> |
|------------------|-----------------|--------------|
| 1 | 1,595.27 | General Fund |
| All Funds | 1,595.27 | Total |

Approved by,

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