

KMR1  
4/11/23 9:54AM

# Aitkin County



Audit List for Board MANUAL WARRANTS/VOIDS/CORRECTIONS

Print List in Order By: 1

- 1 - Fund (Page Break by Fund)
- 2 - Department (Totals by Dept)
- 3 - Vendor Number
- 4 - Vendor Name

*wEX Payments*

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

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# Aitkin County



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

1 General Fund

<u>Vendor</u>	<u>Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>	<u>1099</u>
<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</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		30.83	MED FSA CLAIMS 2023	04/08/2023	Flex Plan Withdrawals N
2	01-044-904-0000-6360		6.10	MED FSA CLAIMS 2023	04/09/2023	Flex Plan Withdrawals N
3	01-044-904-0000-6360		208.34	DEP CARE FSA CLAIMS 2023	04/10/2023	Flex Plan Withdrawals N
4	01-044-904-0000-6360		53.87	MED FSA CLAIMS 2023	04/10/2023	Flex Plan Withdrawals N
	<b>8410 Bremer Bank</b>		<b>299.14</b>	<b>4 Transactions</b>		
<b>1 Fund Total:</b>			<b>299.14</b>	<b>General Fund</b>	<b>1 Vendors</b>	<b>4 Transactions</b>
<b>Final Total:</b>			<b>299.14</b>	<b>1 Vendors</b>	<b>4 Transactions</b>	

# Aitkin County



<b>Recap by Fund</b>	<b><u>Fund</u></b>	<b><u>AMOUNT</u></b>	<b><u>Name</u></b>
	1	299.14	General Fund
<b>All Funds</b>		<b>299.14</b>	<b>Total</b>

Approved by,

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