

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

**MANUAL WARRANTS - Paid 6/22/2023**

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
<b>8410</b>	<b>Bremer Bank</b>						
2	01-100-196-0000-5529		13.00	NSF CHECK/SIPLE	05102023	Recorder Fees-Recorder's Tech Fund	N
7	01-044-904-0000-6360		5.91	WEX MED FLEX 2023	06/19/2023	Flex Plan Withdrawals	N
8	01-044-904-0000-6360		76.38	WEX FLEX MED 2023	06/20/2023	Flex Plan Withdrawals	N
<b>8410</b>	<b>Bremer Bank</b>		<b>95.29</b>	<b>3 Transactions</b>			
<b>5462</b>	<b>Bremer Bank (Elan ACH)</b>						
9	01-044-000-0000-6800		6,097.64	ELAN PAID 06.22.2023	06/16/2023	ELAN - Statement Payment	N
<b>5462</b>	<b>Bremer Bank (Elan ACH)</b>		<b>6,097.64</b>	<b>1 Transactions</b>			
<b>1 Fund Total:</b>			<b>6,192.93</b>	<b>General Fund</b>	<b>2 Vendors</b>	<b>4 Transactions</b>	

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6/22/23 2:15PM

# Aitkin County



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

9 State

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name	1099
<b>8410 Bremer Bank</b>							
4	09-000-000-0000-2022		12.00	NSF CHECK/SIPLE	05102023	Birth/Death Surcharges	N
3	09-000-000-0000-2024		9.00	NSF CHECK/SIPLE	05102023	St Share Of Birth Cert.-Children	N
5	09-000-000-0000-2036		30.00	NSF CHECK/SIPLE	05102023	Recording Surcharges (Was 5871 & 62	N
<b>8410 Bremer Bank</b>			<b>51.00</b>	<b>3 Transactions</b>			
<b>9 Fund Total:</b>			<b>51.00</b>	<b>State</b>	<b>1 Vendors</b>	<b>3 Transactions</b>	

KMR1  
 6/22/23 2:15PM  
 21 Parks

# Aitkin County



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

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name	1099
6	<b>8410 Bremer Bank</b> 21-520-000-0000-5510		100.00	CAMPGROUND REFUND - NILES	B 6474	Co. Parks Campground Fees	N
1	21-520-000-0000-5510		20.00	CAMPING REFUND - MACIASZEK	SR 6557	Co. Parks Campground Fees	N
	<b>8410 Bremer Bank</b>		<b>120.00</b>	2 Transactions			
<b>21 Fund Total:</b>			<b>120.00</b>	<b>Parks</b>	<b>1 Vendors</b>	<b>2 Transactions</b>	
<b>Final Total:</b>			<b>6,363.93</b>	<b>4 Vendors</b>	<b>9 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	6,192.93	General Fund
	9	51.00	State
	21	120.00	Parks
<b>All Funds</b>		<b>6,363.93</b>	<b>Total</b>

Approved by, .....

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