KMR1 9/15/21

1:34PM

Aitkin County



FSA Claim S 2021-#39956314

Audit List for Board

MANUAL WARRANTS/VOIDS/CORRECTIONS

Page 1

Print List in Order By:

1 - Fund (Page Break by Fund)

2 - Department (Totals by Dept)

3 - Vendor Number

4 - Vendor Name

Paid on Behalf Of Name

on Audit List?:

Explode Dist. Formulas?: Y

Type of Audit List:

D D - Detailed Audit List

S - Condensed Audit List

Save Report Options?:

Ν

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General Fund



Audit List for Board

MANUAL WARRANTS/VOIDS/CORRECTIONS

Page 2

Vendo <u>No.</u>	or <u>Name</u> <u>Account/Formula</u>	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid 0	Invoice # Account/Formula Description Paid On Bhf # On Behalf of Name	
8410	0 Bremer Bank						
1	01-044-904-0000-6360		416.68	Dep Care FSA Claims 2021	39956314	Flex Plan Withdrawals	N
2	01-044-904-0000-6360		42.53	Med FSA Claims 2021	39956314	Flex Plan Withdrawals	N
8410) Bremer Bank		459.21	2 Transactions			
1 Fund Tota	l:		459.21	General Fund		1 Vendors 2 Transactions	
Fina	ıl Total:		459.21	1 Vendors	2 Transactions		

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Aitkin County

INTEGRATED FINANCIAL SYSTEMS

Audit List for Board

MANUAL WARRANTS/VOIDS/CORRECTIONS

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Recap by Fund	<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>		
	1	459.21 459.21	General Fund		
	All Funds		Total	Approved by,	4 PAGES EXCESS SOCIES SCHOOL SECURI MARKET MAKE
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					IF NOTIFIED TOTAL ACTIONS ACTIONS ACTIONS ACCORDED ACTIONS ACTIONS ACCIONS