

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

FSA Claims 2021 #39993682

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

KMR1
 10/20/21 10:54AM

Aitkin County



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

1 General Fund

| Vendor No. | Name Account/Formula | Accr | Rpt | Amount | Warrant Description Service Dates | Invoice # Paid On Bhf # | Account/Formula Description On Behalf of Name | 1099 |
|----------------------|--|------|-----|---------------|--------------------------------------|----------------------------|--|------|
| 1 | 8410 Bremer Bank 01-044-904-0000-6360 | | | 434.07 | Med FSA Claims 2021 | 39993682 | Flex Plan Withdrawals | N |
| | 8410 Bremer Bank | | | 434.07 | 1 Transactions | | | |
| 1 Fund Total: | | | | 434.07 | General Fund | 1 Vendors | 1 Transactions | |
| Final Total: | | | | 434.07 | 1 Vendors | 1 Transactions | | |

Aitkin County



Recap by Fund

| <u>Fund</u> | <u>AMOUNT</u> | <u>Name</u> |
|------------------|---------------|--------------|
| 1 | 434.07 | General Fund |
| All Funds | 434.07 | Total |

Approved by,

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