KMR1 11/1/22

1:45PM

Aitkin County

2N



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

FSA Claims 11.01.22

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

11/1/22 1:45PM General Fund

Aitkin County



Audit List for Board

MANUAL WARRANTS/VOIDS/CORRECTIONS

Page 2

	Vendor <u>Name</u> <u>Rpt</u> <u>No. Account/Formula</u> <u>Accr</u>		<u>Amount</u>	Warrant Description Service Dates	<u>Invoice #</u> Paid O	Invoice # Account/Formula Description Paid On Bhf # On Behalf of Name	
841	10 Bremer Bank						
1	01-044-904-0000-6360		223.92	Med FSA Claims 2022	11.01.2022	Flex Plan Withdrawals	N
2	01-044-904-0000-6360		1,276.80	Dep Care FSA Claims 2022	11.01.2022	Flex Plan Withdrawals	N
841	0 Bremer Bank		1,500.72	2 Transactions			
1 Fund Total:		1,500.72	General Fund		1 Vendors 2 Transactions		
Final Total:			1,500.72	1 Vendors	2 Transactions		

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MANUAL WARRANTS/VOIDS/CORRECTIONS

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Recap by Fund	<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>		
	1	1,500.72	General Fund		
	All Funds	1,500.72	Total	Approved by,	