WLC1 3/2/22

11:05AM

Aitkin County

2K



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 paid 03/02/2022

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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/22 11:05AM General Fund

Aitkin County



Audit List for Board

MANUAL WARRANTS/VOIDS/CORRECTIONS

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Vendo <u>No.</u>	r <u>Name</u> <u>Account/Formula</u>	<u>Rpt</u> <u>Accr</u>	<u>Amount</u>	Warrant Description Service Dates	Invoice # Paid C	Account/Formula Description On Bhf # On Behalf of Name	<u>1099</u>
8410	Bremer Bank						
1	01-044-904-0000-6360		208.34	Dep Care FSA 2021	401388535	Flex Plan Withdrawals	Ν
2	01-044-904-0000-6360		229.04	Med FSA 2022	401388535	Flex Plan Withdrawals	Ν
8410	Bremer Bank		437.38	2 Transactions			
1 Fund Total	:		437.38	General Fund		1 Vendors 2 Transactions	
Final	l Total:		437.38	1 Vendors	2 Transactions		

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Recap by Fund	<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>		
	1	437.38	General Fund		
	All Funds	437.38	Total	Approved by,	