

Automatic Supplement

To automatically supplement for unanticipated expenses incurred and reimbursement made to Brookings County.

Department: Information Technology

Amount: \$4,630.98

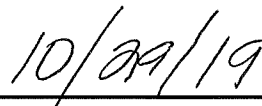
Reason: Reimbursement from insurance

Receipt #: 482729

Line #: 101-4-171-4110



Department Head Signature



Date

CLAIMS ASSOCIATES, INC.

SDPAA CLAIMS ACCOUNT

P.O. BOX 1898
SIOUX FALLS, SD 57101

40266

Description	From Date	To Date	Invoice #	Invoice Amt	Amount
Property Adjustment				\$4,630.98	\$4,630.98

Claim Number: GC2019101246 Claimant: Brookings County Payee: Brookings County
Check Number: 40266 Total Check Amt: \$4,630.98 Event Date: 7/22/2019 Department: SD0054-1 Administration
Check Memo: REIMBURSEMENT OF IMPERSONATION FRAUD LOSS

REMITTANCE STATEMENT - PLEASE DETACH BEFORE DEPOSITING

Michelle

BROOKINGS CO FINANCE OFFICE

REC#: 00482729 10/21/2019 5:35 PM
OPER: LS TERM: 013
REF#: 40266

TRAN: 400.0000 Misc Receipts
RECEIPT# 1696 claims assoc
impersonation fraud loss
ACCOUNT 1013-3690000 \$4630.98
MISC OTHER MISCELLANEOUS

TENDERED: 4,630.98 CHECK
APPLIED: 4,630.98-

CHANGE: 0.00