For Doc # = 64190
* ... Over spent expenditure

Claim	Check	Vendor #/Name/ Invoice #/Inv Date/Description	Document $/ Line $	Disc $	PO #	Fund	Org	Acct	Object	Proj	Cash Account
64190		641 JODY LYNN HICKEY	154.16								
	03/30/24	SUBSTITUTE JUDGE STIPEND	154.16			1000	410360		350		101000

# of Claims 1 Total: 154.16