For the Accounting Period: 3/24

For Doc # = 64243
* ... Over spent expenditure

Claim	Check	Vendor #/Name/ Invoice #/Inv Date/Description	Document $/ Line $	Disc $	PO #	Fund Org Acct	Object Proj	Cash Account
64243		1949 BIG SKY CAFE	111.60					
		03/14/24 safety meeting lunch	111.60			2510 430200	200	101000

# of Claims 1 Total: 111.60