Bills Payable-CHS Imprest

11/01/2025 - 11/30/2025

Vendor Name			Check Amount
HARPER, ROBERT			-79.00
Invoice Number	**Invoice Description**	**Account Number**	**Amount**
May 22	CHS Softball Official 5/22/25		
		10 E 002 1500 3190 00 000000 0000	*-79.00*
HARPER, ROBERT			79.00
Invoice Number	**Invoice Description**	**Account Number**	**Amount**
May 22a	CHS Softball Official 5/22/25-reissue		
		10 E 002 1500 3190 00 000000 0000	*79.00*
ROGOWSKI, SCOTT			-81.00
Invoice Number	**Invoice Description**	**Account Number**	**Amount**
Feb 21	CHS Basketball Official 2/21/25		
		10 E 002 1500 3190 00 000000 0000	*-81.00*
ROGOWSKI, SCOTT			81.00
Invoice Number	**Invoice Description**	**Account Number**	**Amount**
Feb 21a	CHS Basketball Official 2/21/25-reissue		
		10 E 002 1500 3190 00 000000 0000	*81.00*

Fund	Total
10 - EDUCATIONAL FUND	0.00
	0.00