



Deposit Form

Date: _____

Currency:	
Coin:	
Checks:	
Credit Cards:	
Total Amount:	

* Attach Tape
*Attach Settlement Report

Has an invoice been requested from Financial Svcs: Yes* No Don't Know
*If yes, do not complete the rest of the form. Bring the funds directly to the Cashiers in the Student Financial Service Center.

What are the funds being used for?

Index	Fund	Org	Acct Code (Required)	Amount

Email address: _____

Deposited by: _____

Signature: _____

Department Name: _____

Telephone Number: _____

If you don't know the correct account code or index please call Financial Services (487-2242). Deposits with missing data or incorrect cash totals will be returned. Please call 487-2622 if you have any questions.