

**Departmental Deposit Slip**

**Department Name:**

Receipt Description/Student Name:

Account Number/Name:

Total Coins: \$ \_\_\_\_\_

Total Bills: \$ \_\_\_\_\_

Total Checks: \$ \_\_\_\_\_

Total Credit Cards: \$ \_\_\_\_\_

Total Deposit Amount: \$ \_\_\_\_\_

Any person bringing deposits/funds to the cashier's office must fill out the form for each receipt they expect to have. Putting multiple checks on 1 sheet means there will only be 1 receipt.

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