

DATE: \_\_\_\_\_

**CASHIER DEPOSIT FORM**

RECEIVED FROM:
DEPARTMENT:
FOR:

Detail Code	FUND	ORG	ACCOUNT	PROG	AMOUNT	DESCRIPTION (20-character limit)
TOTAL					\$	

**Type of Remittance**

	Currency/Coin	\$		Remarks:
	Checks/Wires	\$		
	Credit Cards	\$		
	Total	\$		

***\*Departments must make deposits at the Cashier's Office by the following business day after receiving the funds.***

**Deposit Guidelines**

- 1) Deposits should be made daily.
- 2) Checks must be properly endorsed and **accompanied by an adding machine tape.**
- 3) Endorsement stamps and machine tapes must identify the department making the deposit.
- 4) Coin must be wrapped.

Processed by: \_\_\_\_\_

Deposited by: