Office of Student Accounts ~ Miscellaneous Deposit Form

Date: _____   University Dept/Organization: _____

Fund: ☐☐☐☐☐☐ **O**rg: ☐☐☐☐☐☐ **A**cct: ☐☐☐☐☐ **P**rog: ☐☐

$_____

Fund: ☐☐☐☐☐☐ **O**rg: ☐☐☐☐☐☐ **A**cct: ☐☐☐☐☐ **P**rog: ☐☐

$_____

Description of funds: _____

Cash Totals: $_____   Prepared by: _____

Check Totals: $_____   (Signature)

Credit Card Totals: $_____   Print Name:_____

Total Deposit: $_____   Phone # or extension: _____

Student Accounts: Verified at time of deposit? Yes/No _____ (signature)

rev 06/15   *Complete **FOAP** must be completed before submitted for deposit.
             *Complete **FOAP** must be written on all checks & credit cards for deposit**.   Questions? Noemi Peterson x4061**