

Department: \_\_\_\_\_ Date: \_\_\_\_\_

Deposit Description: \_\_\_\_\_

Deposit Summary	Number of Items	Amount
Checks	_____	\$ _____
Cash	_____	\$ _____
Credit Card	_____	\$ _____
<b>TOTAL DEPOSIT</b>	_____	\$ _____

**Single code only needed for the deposit transaction:**

Index \_\_\_\_\_ OR Fund \_\_\_\_\_ OR Detail \_\_\_\_\_  
Account \_\_\_\_\_ OR Account \_\_\_\_\_ OR Activity \_\_\_\_\_

**Multiple codes for split transactions:**

Index/Account	Amount	Fund/Account	Amount	Detail/Activity	Amount
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
<b>TOTAL</b>	\$	<b>TOTAL</b>	\$	<b>TOTAL</b>	\$
<b>TOTAL DEPOSIT</b>					\$

Note: Combined itemized totals must equal the total deposit summary reported above. Use additional pages as needed to itemize the deposit.

Name of staff making deposit (Print) \_\_\_\_\_

Signature of staff making deposit \_\_\_\_\_

SOU Phone number \_\_\_\_\_