Deposit Receipt Form

Please fill out and deliver daily deposits to the appropriate Business Office location:
St. Paul
Minneapolis
Murray-Herrick Campus Center, Room 105
Terrence Murphy Hall, Room 201

Window Hours: 9 a.m. – 3:30 p.m.

Contact Information

Name (please print)

Window Hours: 12 p.m. – 3 p.m. – **Wed. only**

Date

If deposit is being made outside of Business Office window hours, please use the drop boxes conveniently located at each office.

The information below must be filled out completely, correctly, and legibly to make a deposit.

eposit Inform	ation					
Index Account			Description			Amount
This defines your department for deposit	This is the Account Code for deposit. For a partial listing see back of form.	Limit 20 Characters. This is what will be seen in Self Service. If you need more information for your records please retain in your departmental office.			Amount to be deposited into index and account.	
					Total	
Cash (currency and	coin)				Must Agre	e to Total Deposit
Check	· 					
Credit Card			Business Office Use Only			
Total Deposit						
Food Service/Boo	okstore/Perkins Use O	nly				
Deposit Amount						
Deposit Bag Numbe	er					