

Receipt #

# DEPOSIT SLIP

Received By: \_\_\_\_\_

Type of Account:  ASB/Club |  District-Clearing |  Co-Curricular

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

Fund/Club Name: \_\_\_\_\_

Deposit To: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Fund                      Org                      Acct                      Program

Cash:	_____
Checks:	_____
Total:	_____

Reason for Deposit (check one box only):

- Donation       Unspent Adv Ck #: \_\_\_\_\_       Fundraiser: \_\_\_\_\_  
 Dues       Other: \_\_\_\_\_

Employee/Advisor Name: \_\_\_\_\_

*Print Name*

Depositor: \_\_\_\_\_

*Signature*