

East Texas A&M University DEPARTMENTAL DEPOSIT WORKSHEET

Date: _____

Department: _____

Person Preparing Deposit: _____ Phone: _____

ACCOUNT NUMBERS:

X Box if
reduction of
expenditure

| | | | | |
|--------------------------|-------------------|-------------------|-------------------|-----------------|
| <input type="checkbox"/> | _____ | _____ | _____ | \$ _____ |
| | <i>(6 digits)</i> | <i>(5 digits)</i> | <i>(4 digits)</i> | <i>(amount)</i> |
| <input type="checkbox"/> | _____ | _____ | _____ | \$ _____ |
| | <i>(6 digits)</i> | <i>(5 digits)</i> | <i>(4 digits)</i> | <i>(amount)</i> |
| <input type="checkbox"/> | _____ | _____ | _____ | \$ _____ |
| | <i>(6 digits)</i> | <i>(5 digits)</i> | <i>(4 digits)</i> | <i>(amount)</i> |
| <input type="checkbox"/> | _____ | _____ | _____ | \$ _____ |
| | <i>(6 digits)</i> | <i>(5 digits)</i> | <i>(4 digits)</i> | <i>(amount)</i> |
| <input type="checkbox"/> | _____ | _____ | _____ | \$ _____ |
| | <i>(6 digits)</i> | <i>(5 digits)</i> | <i>(4 digits)</i> | <i>(amount)</i> |

| | |
|------------------------|-----------------|
| Cash | \$ _____ |
| Checks, money orders | \$ _____ |
| Credit cards | \$ _____ |
| Cash returned (if any) | \$ _____ |
| DEPOSIT TOTAL | \$ _____ |

Deposit Information (receipt numbers, cash short/over, etc.)

VERIFIED & DEPOSITED BY FINANCIAL SERVICES OFFICE

Cashier Initials: _____

Cash Receipt Number: _____

Date: _____

This standardized departmental deposit worksheet is required with all deposits.

Please attach any additional supporting information to be retained for audit purposes.