

Received by: _____ Date: _____

Texas A&M University-Texarkana DEPARTMENTAL DEPOSIT WORKSHEET

DATE: _____

DEPARTMENT _____

Person Preparing Deposit _____ Phone _____

X Box if reduction of expenditure	<input type="checkbox"/>	_____	_____	_____	\$ _____
		<i>(6 digits)</i>	<i>(5 digits)</i>	<i>(4 digit rev code)</i>	<i>(amount)</i>
	<input type="checkbox"/>	_____	_____	_____	\$ _____
		<i>(6 digits)</i>	<i>(5 digits)</i>	<i>(4 digit rev code)</i>	<i>(amount)</i>
	<input type="checkbox"/>	_____	_____	_____	\$ _____
		<i>(6 digits)</i>	<i>(5 digits)</i>	<i>(4 digit rev code)</i>	<i>(amount)</i>
<input type="checkbox"/>	_____	_____	_____	\$ _____	
	<i>(6 digits)</i>	<i>(5 digits)</i>	<i>(4 digit rev code)</i>	<i>(amount)</i>	
<input type="checkbox"/>	_____	_____	_____	\$ _____	
	<i>(6 digits)</i>	<i>(5 digits)</i>	<i>(4 digit rev code)</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 BUSINESS 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.