

## DREXEL UNIVERSITY CASH RECEIPT DEPOSIT VOUCHER

Cashier's Office Main Building, 1<sup>st</sup> Floor 215-895-2848

For Cashier's Use Only									
Processed by:									
Banner Posting Date:									

## THIS FORM IS NOT TO BE USED TO DEPOSIT GIFTS, DONATIONS, OR RESEARCH GRANT/CONTRACT FUNDS. For more information, refer to the cash deposit procedures at http://www.drexel.edu/depts/compt/procedures/cash\_reimb\_procedures.html.

Date of Deposit MM/DD/YY	Check Number	Payer Name	Description/Reason for Deposit To appear on Web*Finance (All deposits over \$1,000 must be accompanied by supporting	Fund Code (6 digits)	Org. Code (4 digits)	Acct. Code (4 digits)	Activity Code (4 digits) (Optional)	Amount	Type (Required) 1=Cash 2=Check(s) 3=Credit Cards	
			documentation.)						<u>↓</u>	write in here
TOTAL										
*Multiple deposits to the same cost center for the same reason/purpose should be written in total on one line. Attach detailed list including sum of deposits listed. *Do not combine deposits for different cost centers or deposits to the same cost center for different reasons/purposes. *One line per cost center per reason/purpose.										
Notes or Additional Description:					Cash Total #1:					
					Checks Total #2:					
Department Contact:					Credit Card Total #3:					
Signature:					Total:					
Contact Phone	Contact Phone Number:									