Receipt #_	
Date:	
Ву:	

## GEORGIA SOUTHWESTERN STATE UNIVERSITY

## CASH RECEIPTS DEPOSIT TRANSMITTAL FORM

			CASH	ECEN 15	DEI OSII	IKANSWIIITAL	rokwi	
DEPARTM	ENT:						DATE:	
DESCRIPT	ION:							
BEGINNIN	G RECEIPT	`NUMBER:						
ENDING RECEIPT NUMBER: (ATTACH ALL RECEIPTS)					* RECEIPT TOTAL: \$			
CASH:								
CHECKS:								
CREDIT CA	ARDS:							
*Should be		Receipt Total*						
Please post	this deposit	to the following	g account/s	number/s:				
ACCOUNT			D	Cl	Const			
Account	Fund	Dept ID	Prgm	Class	Grant	\$		
						\$		
						\$		
Sales Tax Account 215000	Fund 60000	Dept ID 0000000	Prgm	Class	Grant	\$		
		RX supplies, and M	Miscellaneous	Sales – such	as t-shirts)	Ψ		
			TOTA	AL CREDI	TS* \$			
Report prepa	ared by:							

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