THE ACADEMY
OF NATURAL SCIENCES
of DREXEL UNIVERSITY

Academy of Natural Sciences
CASH RECEIPT DEPOSIT VOUCHER

Cashier's Office
Main Building, 1st Floor
215-895-2848

Reset Calculate

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 documentation.)	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 ↓	write in here A
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
								0.00	Pick One	
							TOTAL	0.00		

***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**:	0.00
	Checks Total #2:	0.00
Department Contact:	**Credit Card Total #3**:	0.00
Signature:	**Total**:	0.00
Contact Phone Number:		