

DEPOSIT SLIP (Form at S:Business/Public/Cashier Forms/DEPOSIT SLIP.docx)

Date: _____ From: _____ Office: _____ Phone: _____

Cash Total \$ _____ Check(s) Total \$ _____

Discover Total \$ _____ Mastercard Total \$ _____ Visa Total \$ _____

Total Deposit \$ _____

Description: _____

Deposit into **FOAPAL:**

F: Fund - O: Organization - A: Account - P: Program - A: Activity (only for specific Depts.)- L: Location-(only for specific Depts.)

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

**Remember to collect and remit sales tax at 6% on sales of goods including various fundraisers. Not certain if a sale is taxable? Please Call Linda Berlin @ 5-2118. Please put your FUND 1st and then Sales Tax # 2260, 2nd. Sales tax only has two numbers to it.*

Are funds for payment on an invoice? No ___ Yes ___ Invoice # _____ Customer Name/ID: _____

Do you want a copy of the receipt? No _____ Yes _____

- **Cash, credit card numbers & unstamped checks cannot be sent interoffice for security reasons. These need to be hand delivered to Student Financial Services on main campus.**
- **Stamped checks can be interoffice mailed to Student Financial Services.**

Thank you very much! Questions? Linda 5-2118