

**REGENT UNIVERSITY
DEPARTMENTAL DEPOSIT TICKET**

School/Department: _____ DATE: _____

Cash: _____ Check: _____ Total: _____

Cost Center: _____ REVENUE CODE(S): _____

DESCRIPTION: _____

COST CENTER REPRESENTATIVE

RECEIVED BY: _____
BUSINESS OFFICE REPRESENTATIVE

DATE _____

| | | | | | | | |
|------------------------------|-------|-------------------|--------------|---------|---------|----------|-----------|
| For Business Office Use Only | | | | | | | |
| Detail Code: _____ | | Description _____ | | | | | |
| COA | Index | Fund | Organization | Account | Program | Activity | Cr Amount |
| R | -- | _____ | _____ | _____ | _____ | _____ | \$ _____ |
| Detail Code: _____ | | Description _____ | | | | | |
| COA | Index | Fund | Organization | Account | Program | Activity | Dr Amount |
| R | -- | _____ | _____ | _____ | _____ | _____ | \$ _____ |

------(Please detach)-----

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