

Deposit Form

To: Augusta University Business Office

From (Location or Department):

Contact Information (Print Name & Telephone Number):

Deposit Verified By (Print Name & Telephone Number):

Date:

Amount of Deposit: \$

Reason for Deposit:

Detail Code:

Or (as applicable)

Account String (CFC):	-	-	-	-
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Example: Account – Fund – Department – Program – Class (Project/Grant id will go at the end) (As applicable)

Budgetary accounts (account code with 3 consecutive zeros at the end of the number) cannot be used. Ex. 441000

Any account code that begins with a 7 must have an expense credit form accompanying the deposit. A copy of all expense credit forms must be forwarded to the Financial Accounting Office. Expense Credit Forms are found on the Controller's Division Web Site under Financial Accounting. There is also a shortcut from the Business Office Web Site.

Signature of Depositor:

Signature of Person Verifying Deposit: