FOR UNIVERSITY USE ONLY

Departmental Deposit Remittance Form

BUSINESS UNIT: NJCUN

Date: _____ Total Deposit: $ _____

Name of Person Transmitting Dep. _____

Department: _____ Department Ext.: _____

Please provide a depos description: _____

DEPOSIT ACCOUNT INFORMATION BUSINESS UNIT NJCUN - PLEASE DO NOT CHANGE

NJCUN		-		-		-		-		
Business Unit	Account (5 digits)		Fund Code (3 digits)		Department (6 digits)		Project (7 digits)		Budget Reference (e.g. 2014JUL)	

COINS _____

CHECKS _____

CREDIT CARDS _____

GRAND TOTAL $ _____

	x		=	
$ 10.00	x		=	
$ 5.00	x		=	
$ 2.00	x		=	
$ 1.00	x		=	
COINS				
$ 1.00	x		=	
$ 0.50	x		=	
$ 0.25	x		=	
$ 0.10	x		=	
$ 0.05	x		=	
$ 0.01	x		=	
TOTAL				

****

BURSAR USE ONLY

CASH _____

COINS _____

CHECKS _____

CREDIT CARDS _____

GRAND TOTAL $ _____

DEPOSIT REC'D BY: _____

DATE: _____

CASH RECEIPT #: _____

CHECK RECEIPT #: _____

CREDIT CARD RECEIPT #: _____

Updated: 11/28/201