

**University of Texas at El Paso
Student Business Services
Deposit Summary**

Department Name Kinesiology

Date _____

Cash \$ _____ (include calculator tape)

Receipt #'s (list)

Checks \$ _____ (include calculator tape)

Credit Cards

Visa \$ _____

MC \$ _____

Disc \$ _____

Amex \$ _____

Total Cards \$ _____

} separate by type and include
calculator tape for each

Voids (list)

Over/(Short) \$ _____

Total Deposit \$ _____

Description	Account Number	Object Code	Amount
Physical Fitness in the Golden A	30 - 3663 - 3296	3342	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
Total Deposit			\$ _____

(an object code is required for each account number)

Prepared by: _____ Date _____
(signature)

Reviewed by: _____ Date _____
(signature)

Dept. ext. _____

Comments

Receipt with payer's name requested

