Student Activity Fund Deposit

Activity Date: ______________    Cash: _________

Check: ________

Business Office Deposit Date: ________________ Total Amount: ___________

(No more than one business day later)

Received From: _______________________________Student Organization Officer
(Signature)______________________________Student Organization Advisor
(Signature)

Activity: _____________________________________________________

Organization: ________________________________________________

Please deposit to our    ORG       SEN     Account (circle one)

For Business Office use:
Received By: __________________________________________________

Student Activity Fund Deposit FORM M

Activity Date: ______________    Cash: _________

Check: ________

Business Office Deposit Date: ________________ Total Amount: ___________

(No more than one business day later)

Received From: _______________________________Student Organization Officer
(Signature)______________________________Student Organization Advisor
(Signature)

Activity: _____________________________________________________

Organization: ________________________________________________

Please deposit to our    ORG       SEN     Account (circle one)

For Business Office use:
Received By: __________________________________________________