



University  
of Windsor

DEPOSIT

To: **ACCOUNTS RECEIVABLE DEPARTMENT**

From:

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Extension: \_\_\_\_\_

Date: \_\_\_\_\_

> Type of Currency: **USD** **CAD**

> Type of Deposit: **Cheques** **Cash** **Both**

> Number of Cheques: \_\_\_\_\_

**TOTAL AMOUNT FOR DEPOSIT: \$** \_\_\_\_\_

**IMPORTANT: If a single receipt has a value of \$5000**

E-MAIL and/or Telephone # are required. If a Contact is not identified then Accounts Payable will be selected by default.

**BUSINESS NAME/CONTACT NAME:** \_\_\_\_\_

**MAILING ADDRESS:**

**STREET:** \_\_\_\_\_

**SUITE/ P.O. BOX:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **POSTAL CODE/ STATE:** \_\_\_\_\_ **COUNTRY:** \_\_\_\_\_

**CONTACT PHONE :** (\_\_\_\_) \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

> Please deposit the following amounts as specified below (Note: if more than one account number, please indicate the distribution of funds. If there is no value for one of the segments, please leave blank):

> If more than one account number please indicate the distribution of funds.

> The description can be maximum of 256 characters and will be what appears in Finance.

## Account Information & Description

Description #	Fund	Dept.	Program	Project	Natural Account	Class.	Amount
1							
2							
3							
4							
5							
						Total	

Description (maximum of 256 Characters):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

## Cash and Coin Inventory

PLEASE PROCEED TO SUBMIT THE FORM IF YOU HAVE SELECTED 'CHEQUE' IN THE 'TYPE OF DEPOSIT' OPTIONS.

\_\_\_\_\_ X \$ 100 = \_\_\_\_\_

\_\_\_\_\_ X \$ 50 = \_\_\_\_\_

\_\_\_\_\_ X \$ 20 = \_\_\_\_\_

\_\_\_\_\_ X \$ 10 = \_\_\_\_\_

\_\_\_\_\_ X \$ 5 = \_\_\_\_\_

\_\_\_\_\_ X \$ 1 = \_\_\_\_\_

Total Bills: \_\_\_\_\_

\_\_\_\_\_ Toons (Rolled) \_\_\_\_\_

\_\_\_\_\_ Toons (Loose) \_\_\_\_\_

\_\_\_\_\_ Loons (Rolled) \_\_\_\_\_

\_\_\_\_\_ Loons (Loose) \_\_\_\_\_

\_\_\_\_\_ Quarters (Rolled) \_\_\_\_\_

\_\_\_\_\_ Quarters (Loose) \_\_\_\_\_

\_\_\_\_\_ Dimes (Rolled) \_\_\_\_\_

\_\_\_\_\_ Dimes (Loose) \_\_\_\_\_

\_\_\_\_\_ Nickels (Rolled) \_\_\_\_\_

\_\_\_\_\_ Nickels (Loose) \_\_\_\_\_

Total Coins: \_\_\_\_\_

TOTAL AMOUNT FOR DEPOSIT: \_\_\_\_\_

Please print this form and submit with your deposit to: Accounts Receivable Department. Room 420, CHT. Remember cash should never be sent via interoffice mail.

## ACCOUNTS RECEIVABLE DEPARTMENT USE ONLY

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_