AG-207 (11/16)

Texas A&M AgriLife
Administrative Services – Banking and Receivables

Deposit Form

Receipt dates _____ to _____

Fiscal Reference C

Receipt Number (Ref 2)

Dept. Ref. _____
(Ref 4)

Dept. Ref. _____
(Ref 3)

Clear All Fields

Enclosed are monies consisting of:

Checks	$
Cash	$
Other	$
TOTAL	$0.00

For Deposit With:

☐06 Research ☐07 Extension ☐20 TVMDL

_____
4 Letter department code

Accounting Analysis			***Amount***
			$
			$
			$
			$
			$
			$

Description

Receipt Number	***Payor/Item***	***Quantity***	***Unit Price***	***Amount***
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			TOTAL	$0.00

Departmental Approval

Signed: Original Signature and Date Required

Date:

Deposit Slip Number: _____

Fiscal Approval

Signed: Original Signature and Date Required

Date:

Laserfiche Document: _____