

# Macalester College

## Department Deposit Form – Personally Deliver to Student Accounts Office in 77 Mac Daily

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

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

Cash Total: \_\_\_\_\_ (CASH)

Check Total: \_\_\_\_\_ (CHEK) # of Checks: \_\_\_\_\_

Total Deposit: \_\_\_\_\_

<b>Two Signatures Required on Cash Deposits over \$1000:</b>		
Signature _____	Name (Print) _____	Date _____
Signature _____	Name (Print) _____	Date _____

**For Cashier's Use Only:**

Detail Code: CASH or CHEK Description: (Defaults) Debit or Credit: D Amount: (above)

Detail Code: GLTR Debit or Credit: C

<b>Revenue FOAPAL Example</b>	100000	-	XXXXXX	-	5XXXXX	-	99	-	-	-
	Fund		Org		Account		Prog		Act	Loc
Description: _____										
FOAPAL: _____ - _____ - _____ - _____ - _____ - _____	Amount: _____									
Description: _____										
FOAPAL: _____ - _____ - _____ - _____ - _____ - _____	Amount: _____									
Description: _____										
FOAPAL: _____ - _____ - _____ - _____ - _____ - _____	Amount: _____									
Description: _____										
FOAPAL: _____ - _____ - _____ - _____ - _____ - _____	Amount: _____									

**Please keep copies for your department records. Student Accounts is not responsible for department records. Student Accounts will no longer return paper copies of deposits to departments.**

**Please use Banner to view deposits. Contact Tracy Arndt ext. 6567 to arrange access and/or training.**

Signature of Person Completing Form \_\_\_\_\_ Date \_\_\_\_\_

Signature of Person Delivering Form to Student Accounts \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

**For Cashier's Use Only:**

Receipt #: \_\_\_\_\_ Date \_\_\_\_\_ Initials \_\_\_\_\_