

DEPOSIT FORM

Please complete the following form and return to the Office of Student Accounts. All deposits should be delivered to the Office of Student Accounts on a daily basis.

Department:			
Processed by:			Date:
Account #:		Return I	Receipt to Box:
Description			
Cash Total:	\$		
Check Total:	\$	•	
EFT Total:	\$	•	
Credit Card Total:	\$		
	\$	•	
Grand Total:	\$		
Employee Signature			Date
Student Accounts Representative Signature			Date Received at SA Office
SA Office use: Credit Card s Cash Card: Distribution: MCVIS Pay Method: CC Other Depts: Distribution: QPCC Pay Method: QPCC			

If you have any questions regarding the deposit process, please contact Shelley Bernier at extension 6482.