

STUDENT ORGANIZATION DEPOSIT

DATE SUBMITTED TO STUDENT LIFE: _____

ORGANIZATION NAME: _____ ACCOUNT: _____

NAME OF PERSON MAKING DEPOSIT: _____

PHONE: _____

AMOUNT: _____

DESCRIPTION OF DEPOSIT/SOURCE OF REVENUE: (include name and date of activity)

If depositing membership dues or fees for specific items to be purchased- please attach a list or use the space provided to note the paying members name and student identification number.

Signature of Depositor

Date