

Appendix B

Oakland University

Rochester, MI 48309-4401

PAYMENT/DEPOSIT RECEIPT

PLEASE TYPE OR PRINT (SHADED AREA: BUSINESS OFFICE USE ONLY)

Date _____

Received of _____ Student No. _____
IF APPLICABLE

Deposited by _____ Org. Name _____

Purpose _____

ACCOUNT CODES TO BE CREDITED

Fund (G/L Only)	Organization	Subaccount	Amount

FOR DEPARTMENTAL DEPOSITS ONLY

Checks	\$		\$100		50c		
			\$ 50		25c		
			\$ 20		10c		
			\$ 10		5c		
			\$ 5		1c		
Dir. Dep.			\$ 1		Other		
Charge Card			Other				
Sub Totals	\$			\$		\$	
Total Amount						\$	

DO NOT WRITE BELOW THIS LINE

RECEIPT NUMBER
