

DEPOSIT TRANSMITTAL WITHOUT CASH RECEIPTING PRIVILEGES

Department : _____

Funds received from: _____

(Specify name of individual(s), group, agency or company) If common group, use use descriptive term such as "students" or "participants.")

E-mail Receipt to: _____ @uncw.edu (required)

Cc: E-mail Receipt to: _____ @uncw.edu (required)

**This Deposit Transmittal is not an official numbered receipt.
The Cashier's Office will e-mail a receipt to the address(es) listed above.**

**Section 1:
CASH/CHECK/CREDIT CARD**

Cash/coin: \$ _____
Checks: \$ _____
Credit Cards: \$ _____

**Section 2:
ELECTRONIC FUNDS**

Acctg. Use Only
Sequence # _____

**Section 3:
ACCOUNTING USE ONLY**

Sequence # _____

TOTAL \$ _____ * **Wire:** **TOTAL** \$ _____ * **Transfer:** **TOTAL** \$ _____ *

* Must equal "TOTAL AMOUNT DEPOSITED" below.

DEPOSIT TO:

DETAIL CODE	FUND CODE (6 digits)	ACCOUNT NUMBER (6 digits)	ORGANIZATION CODE (5 digits) (If not default)	AMOUNT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

*Total Amount Deposited _____

Explanation of Deposit/Comments:

**Digital Signature: _____

Print Name of Preparer _____

Date _____

****SIGNER MUST HAVE RECEIPTING PRIVILEGES ON FILE IN THE CASHIER'S OFFICE**