



ASSOCIATED STUDENTS INC

CALIFORNIA STATE UNIVERSITY, FULLERTON™

AGENCY ACCOUNT DEPOSIT FORM

FOR ACCOUNTING OFFICE USE ONLY

Received By _____

Date _____

Date of Deposit _____

Amount of Deposit _____

Name of Individual Making Deposit _____

Phone Number _____

CSUF E-mail _____

Name of Agency (Club) To Be Credited _____

Agency Number _____

6901 - Membership Dues

6902 - Event/Others

If 6902 - Event/Others selected, please describe

CASH

DENOMINATION	COUNT	AMOUNT
TOTAL		

CHECKS

NO. OF CHECKS	
AMOUNT:	

CASH & CHECK TOTAL

Individual Making Deposit Signature

Advisor Signature (optional)

Individual Making Deposit Name

Advisor Name (optional)