

FORM 0012 (489) PROCEDURE 05-06-02
UNIVERSITY OF PITTSBURGH

CASH REPORT

INSTRUCTIONS: This Report must be typewritten. NO ALTERATIONS PERMITTED. Deliver Report with all copies intact to the Cashier's Office. The Cashier will return the pink copy to the Originator as a Receipt, transmit the white copy to General Accounting and retain the canary copy.

Cash Report Of: <i>Resp. Center Code</i>		<i>Department Name</i>		<i>Campus Address</i>		<i>Telephone</i>		<i>Voucher No.</i>		
1		2		3		4		27		
Dept. Report No.		For Cash Collections On (From)			(To)					
5		Mo. 6	Day	Yr.	Mo.	Day	Yr.	12	17	
ACCOUNT NO.		DESCRIPTION OF DEPOSIT						AMOUNT		
1	9 10 11 22	<i>(Limit detail to one line - attach all additional detail)</i>						41	42	51

7	8	9	10
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NOTE: This Report will not be accepted unless Certification By Originator is completed. **TOTAL**

CERTIFICATION BY ORIGINATOR		VERIFICATION OF RECEIPT		VERIFICATION OF DEPOSIT	
CASH	\$ 11	Received From (Signature) 17		Amount Deposited 22	
CHECKS & MONEY ORDERS	\$ 12	Date 18	Time 19	Date of Deposit (Mo./Day) 23	
TOTAL	\$ 13	Cashier's Signature 20		Bank Account Identification Code 24	
Certified Correct By (Signature) 14		CASHIER'S STAMP		Deposit Ticket Prepared By (Signature) 25	
Title 15		21 26			
Date 16		RECEIPT NOT VALID UNLESS STAMPED		PAGE OF	