

N.W.U. Deposit Form

Date: _____

Check(s)/Cash Received From: _____

Deposit subject to withholding of Nebraska Sales Tax ? Yes No (See business office for explanation)

Comments to appear on Budget print-out.

Account Number: _____ - _____ - _____ Cash: \$ _____

Account Name: _____ Checks: \$ _____

Return Receipt To: _____ Total Deposit: \$ _____

(Please Note: If you are depositing a group of checks, it is your responsibility to record details of the individual checks if you want to retain that information)

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