STUDENT GROUP DEPOSIT FORM

Undergraduate Student Life

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| Name of Student Group | | | | | | | | |
|--|--|--|--|------------------------------------|---|-------------------|---------|--|
| Name of Event/Program | | | | | | | | |
| Date of Event: | Department | : 4560 | Project: AG00 | or U | R00 | | | |
| Source of Funds: (Selec | ct 1 source per depos | sit form) | | | | | | |
| External Sponsors Does the Eventbrite Ticket Fundraising, On-O Membership & Re | cumentation showing hip: Attach contract, sponsor require a ta Sales: Attach event p Campus: (e.g. bake sa egistration Fees: Att ce of funding in detail | agreement or spo ax benefit? Yes bayout from Even les, merchandise s tach fee structure/ | nsor letter. Spo No tbrite and docur sales collected on | nentation outlir the Lerner ram | iing price list ps) | | | |
| REMINE | DER: Funds cannot b | be collected using | Venmo, PayPal, | GoFund Me or | other third-party | apps or platform | s. | |
| Please provide a detail | ed description of the | item(s) sold and/ | or funds received | 1. | | | | |
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| CASH DEPOSIT CHECK DEPOSIT | | | | Г | WIRE DEPOSIT | | | |
| 23 | - <u> </u> | - | <u>.</u> | 95 | 8 | · · · · · | | |
| Denomination Quant | ity Total | Check Amount | Quantity | Total | Reference No. | Payment Date | Total | |
| \$100 | | | | | | | | |
| \$50 | | | | 2 | (| s | | |
| \$20 | | | | | | | | |
| \$10 | | | | | | | | |
| \$5 | 6 0 1 | | | 63 61 | | | | |
| \$1 | | | | | | | | |
| Grand To | tal: | | Grand Total: | 20 | G | rand Total: | | |
| NOTE: The University dep accept coins. Please change cash deposit. | | NOTE: Use addition itemized checks for Kindly provide physic deposited. | | deposit form. | NOTE: Kindly provide the second sec | | of each | |
| | Return this signed | form and the depos | it to USL Adminis | ration & Planning | g in Lerner Hall 510. | | | |
| Group Representative N | Jame: | - | UNI | Si | enature: | | | |
| | | | | | Signature:Signature:Signature: | | | |
| Adviser or Unit Manage | | | | | | | | |
| Note to adviser: Please ensure all j | fields are complete and support. | ing documentation is attac | bed and reviewed prior . | to signing. | | | | |
| | | | | Admin & | Planning Use Only | <u>.</u> | | |
| | | | | | Subtotal: | | | |
| | | | | | Total Petty Cash Returned: | | | |
| | | | | | Total Deposit (Subtota | l Less Total PC): | | |
| Columbia Colu | | lumbia Engi | NEERING | | ASD CL CON | | | |
| COLUMBIA COLLEGE COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK | | | | | A&P Staff Name: | | | |
| osit Form, 04/2023 | | | | | Signature: | | | |

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