

DATE: ___/___/___

CASH RECEIPT
XAVIER UNIVERSITY

NO. _____

BANK FUND: _____

RECEIVED FROM: _____

FOR: _____

<i>(Enter FUND or ORG., but NOT both)</i>		ACCOUNT	PROG.	AMOUNT	DESCRIPTION <i>(Maximum - 35 Characters)</i>
FUND	ORG.				
_____	_____	_____	_____	\$ _____ . ____	_____
_____	_____	_____	_____	_____ . ____	_____
_____	_____	_____	_____	_____ . ____	_____
_____	_____	_____	_____	_____ . ____	_____
			TOTAL	\$ _____ . ____	

<i>Type of Remittance:</i> Currency/Coin \$ _____ . ____ Checks/Wires _____ . ____ Credit Cards _____ . ____ TOTAL _____ . ____	Remarks: _____ _____ _____ _____
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NOTE: Credit card deposits MUST be on a separate receipt. *Please attach tape with deposit*

Deposited By: _____
(Signature)

Received By: _____
(Signature)

DATE: ___/___/___

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_____	_____	_____	_____	\$ _____ . ____	_____
_____	_____	_____	_____	_____ . ____	_____
_____	_____	_____	_____	_____ . ____	_____
_____	_____	_____	_____	_____ . ____	_____
			TOTAL	\$ _____ . ____	

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