

AGENCY DEPOSIT NUMBER	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left; padding: 2px;">TYPE OF DEPOSIT</th> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> 1. Depoist Slip</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> 2. Cash &amp; Checks</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> 3. Credit Advice</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> 4. Cash</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> 5. Checks</td> </tr> </table>	TYPE OF DEPOSIT	<input type="checkbox"/> 1. Depoist Slip	<input type="checkbox"/> 2. Cash & Checks	<input type="checkbox"/> 3. Credit Advice	<input type="checkbox"/> 4. Cash	<input type="checkbox"/> 5. Checks
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BANK DEPOSIT

TREASURER

	DO NOT WRITE IN THIS SPACE

AGENCY NO	AGENCY NAME					PAYEE (REFUND)
	BANK NAME AND LOCATION	DATE	FY	1099	V/S	VENDOR NO./SOCIAL SECURITY NO.
					SOURCE OF DEPOSIT	CHECK NO
					C.C.D. CODE	TOTAL NET AMOUNT \$

**TO: STATE TREASURER OF SOUTH CAROLINA**  
**Deposited This Day As Follows:**

R	TRANS CODE	MINI CODE	SUB FUND	SUBSIDIARY	ENCUMBRANCE	PROJECT	PH	AGENCY	TRAVEL			MULTI PURPOSE CODE	OBJECT CODE	DET	TRANSACTION AMOUNT
				ACCOUNT	NUMBER	CODE		REFERENCE	SLN	# MI	# TRIPS				
				SOCIAL SECURITY NUMBER		TRAVELER'S LAST NAME		FI MI							
BANK ACCOUNT TITLE: <b>General Deposit</b>															
PREPARED BY: _____													TOTAL		

BANK ACCOUNT CODE