

**MERCER UNIVERSITY
UNIVERSITY CASHIER
DEPOSIT TRANSMITTAL FORM**

Please submit a separate transmittal form for each account number.

Date: _____

Dept./School: _____

Description: _____

Account: _____

Cash: _____

Checks: _____

Credit Card: _____

****CANNOT BE COMBINED WITH CHECKS OR CASH**

Total Deposit: _____

Signed: _____