

# DAILY REPORT FOR CASH RECEIPTS



Date \_\_\_\_\_

Account No. \_\_\_\_\_

		<b>For Accounting &amp; Financial Services Use Only</b>	
Cash Total	\$ _____	Total Amount Deposited	\$ _____
Check Total	\$ _____	Receipt No. _____	Cashier _____
Department Total	\$ _____	Date ____/____/____	

Description \_\_\_\_\_

Depositor Name and MSU ID \_\_\_\_\_

MSU is an affirmative action, equal opportunity, educational institution.

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**MOREHEAD STATE  
UNIVERSITY**

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