

University of Florida  
Deposit Consignment Sheet

Department Name: \_\_\_\_\_

Prepared By: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt is hereby acknowledged for \_\_\_\_\_ locked deposit bag(s), said to contain funds for delivery to University Cashier, S-113 Criser Hall.

Serial Number of Bag	Amount (\$)

\_\_\_\_\_  
Department Signature

\_\_\_\_\_  
Time of Deposit

\_\_\_\_\_  
Date of Deposit

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For Internal Use Only

\_\_\_\_\_  
Cashier's Signature

\_\_\_\_\_  
Time of Deposit

\_\_\_\_\_  
Date of Deposit