Send duplicate rece	ipt to:

CASHIER DEPOSIT: For CardQuest - Only



This form is used for a deposit relating to CardQuest purchases, sponsored refunds, and money due back to the Institute. Please bring refund check and form and deposit in "Finance Deposit Drop Box" next to the post office in the Keith Spalding Building. Attach copy of deposit form to CardQuest report.

*Please see instructions page for cash deposits.

1. Date:	<u>-</u>		2. Requestor:	
	Day Month			
3. Phone:	:		4. Department:	
5. Paymo	ent Method:			
Cash		Check#	Other:	
			ne form. Please use separate Cashier Form do not combine international checks or curre	** * *
6. Descr	iption: (Please	include 5 digit C	ardQuest Report # and Cardholder Name/T	raveler Name)
CardQues	t Report #			
Cardholde	Name:		Traveler Name:	
Category	Reimbursem	ent	Sponsored Refund: Oth	ner:
7. Itemiz	e amount by Pi	oject, Task, Aw	rard and Category: (Please use separate C	Cashier Forms for multiple PTA's or Categories)
Projec	ot:		Amount \$:	
Tas	sk:		Award:	
8. Gener	al Ledger Acco	ount Default:	2498 1101 0001 00000 211 111	000
9. This p	ortion to be com	pleted by the Ca	Itech Cashier's Office ONLY:	
a) (Cash Accountant	Signature:		
b)	Receipt #:		c) Date:	
d) (Comments:			
_				

PLEASE SEE NEXT PAGE FOR INSTRUCTIONS

07/18

INSTRUCTIONS

Date: The date the form is filled out, and should be in the following order: **day** (2 digits), **month** (3 letter abbreviation) and year (4 digits). For example: 02-Mar-2016

Requestor: The name that the Cashier/Accounting offices should contact for any follow-up questions.

Phone: The telephone number or extension of Requestor.

Department: The department name of Requestor.

Payment Method: Indicate the type of payment for this deposit. Each type of payment should be on a separate form. Any international currency or checks must be on a separate form from domestic items.

Description: Describe the purpose of the payment received by Caltech.

This is the CardQuest Report Number you will find it on the header page of the report. Ex:



List the Cardholder Name and Traveler Name if applicable

Category: Please indicate reason for refund in the appropriate category; Reimbursement, Sponsored Refund, Other*.

*If other, please indicate purpose of refund.

Account: Distribute amount for each Project, Task, Award, and Category combination.

Amount: The amount for each combination.

Sponsored Research: Deposits for a specific federal/non-federal sponsored grant or contract. Handled by OSR/Project Accounting.

Account: Supply General Ledger account number if different from default account.

*Cash Deposits: Deposit cash at the Credit Union.

- 1. The Credit Union will stamp the deposit form
- 2. Scan and email the stamped deposit form to financedropbox@caltech.edu
- 3. Attach a copy of the deposit form to the report

******Additional CardQuest instruction	S***********
--	--------------

Please attach a copy of the deposit form to the report in CardQuest.