

**MISSISSIPPI STATE UNIVERSITY
CASH RECEIPT
VOUCHER**

Checks _____

Cash _____

Credit Cards _____

Total Deposit _____ \$0.00

Departmental Use Only

***PLEASE PROVIDE AN EXTRA COPY FOR RETURN RECEIPT
DEPOSIT TO ACCOUNT(S)***

Fund (6)	Org (6)	Account (6)	Program (6)	Activities (6)	Amount
TOTAL THIS PAGE					\$0.00

DESCRIPTION (Up to 25 Characters)

MEMO: (Will not be entered by Cashier)

--

PREPARED BY: _____

DATE: _____ TELEPHONE #: _____

SUBMITTED BY: _____