

GRANTS AND CONTRACTS ACCOUNTING RECEIPT FORM

DATE: _____

DEPARTMENT DEPOSIT RECEIVED FROM: _____

PREPARED BY/PHONE # _____

CASH AMOUNT: _____

CHECK AMOUNT: _____

MC/VISA AMOUNT: _____

DISCOVER AMOUNT: _____

AMEX AMOUNT: _____

TOTAL AMOUNT: _____

SPONSOR INVOICE

Sponsor Name _____

Award # _____

AR Invoice _____

Warrant _____

Amount _____

GRANT RELATED INCOME

Award # _____

Project # _____

Task # _____

Exp Type _____

Amount _____

NEGATIVE EXPENSE

Award # _____

Project # _____

Task # _____

Exp Type _____

Amount _____

**Print this page and deliver with all cash, checks, and credit card slips to:
Grants & Contracts Accounting, 801 Fin Services Bldg., Box 16.
Please direct any questions to 205-934-9330.**