## NOVA SOUTHEASTERN UNIVERSITY STUDENT ACTIVITY FEE ACCOUNTS OFFICE

	Donation Deposit Slip		
Date:	Check # / Cash	Dollars	Cents
College:	\$		
Name of Club/Org.:	TOTAL DEPOSIT \$		
Preparer:			
Daytime Phone:			
Donor Name:	*Each donation should have its ov	vn donation	slip
Company Contact:	*We only accept \$2 in loose coins		
Address:			
Phone:			
Ack	nowledgement Instructions		
Name/Title of Donor:			
Address:			
Purpose of Gift/Details			
for personalizing letter:			
	Office Use Only		