



**ASSOCIATED STUDENTS**  
SAN JOSE STATE UNIVERSITY

General Services Center  
One Washington Square  
Student Union, Room 1800  
San Jose, CA 95191-6129

t: 408-924-6200  
f: 408-924-6220  
as.sjsu.edu

### Campus Organization Deposit Form

All fields must be filled out  
Please Print

Account No. \_\_\_\_\_

Date: \_\_\_\_\_

**Account/Student Organization Name:**

(Please use your recognized name registered under student involvement. No abbreviations or acronyms)

**Description:**

(Where the money is coming from?)

BREAKDOWN		
COINS	\$	
CURRENCY	\$	
CHECKS	\$	
<b>TOTAL</b>	<b>\$</b>	

No. of Checks: \_\_\_\_\_

\_\_\_\_\_  
Depositor Name (Print)

**FOR OFFICE USE ONLY:**

\_\_\_\_\_  
Depositor Signature

\_\_\_\_\_  
Whiztag #/initial