



SAINT JOSEPH'S UNIVERSITY
Cash/Check/Credit Card Transmittal

To: University Cashier, SSC

Date _____

From Dept. _____

Budget # _____

Amount of Checks \$ _____

Amount of Cash \$ _____

Amount of Visa/MasterCard \$ _____

Total \$ _____

Prepared by _____

University Cashier, Student Service Center

Subject to Count

Printed by Saint Joseph's University Press / 1998 / 13025

Initials: _____



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