



TRANSMITTAL
Miscellaneous Funds

Date: _____

ATTACHED ARE THE YELLOW COPIES OF NUMBERED RECEIPTS LISTED BELOW.

A. No. _____ through No. _____

B. No. _____ through No. _____

From: _____
LOCATION CAMPUS

CONTACT PHONE NUMBER _____

Col.#	Transactions	Dollars	Cents
1	Transcripts		
2	Child Care Tuition		
3	Cell Phone Usage		
4	Auto Salvage Parts		
5	Conference Fees		
6	Library Fees		
7	TCOM Fees		
8	Nursing Fees		
9	GED Test Fees		
10	TEA/GEDTS Fees		
11	GED Transcript Fees		
12	Correspondence Fees		
13	Contract Testing Fees		
14	Other:		
15	Other:		
16	Other:		
Total			

Prepared By: _____

Received Cashier: _____

Col. # For Deposit in the below Accounts:

White – Business Office
Canary – Cashier
Pink – Department



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