

## 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, AB990. Please direct any questions to 205-934-9330.**