Stockdale ISD Deposit Form

Please circle Bank Account:

General Operating Account OR **Activity Fund Account**

Date:	**Organization:**
Department:	**Fundraiser:**
Description:	**Sponsor:**
Administrator:	**Student Name:**

only if sending a student with deposit

Currency:	
Coins:	
Checks:	
Total:	

Verified by 1:_____

Verified by 2:_____

Office Use Only: Admin Staff Accepting Deposit:_____

Student

Activity Code: 865 36 6399 99 0 00

Campus

Activity Code: 461 36 6399 99 0 00

General Fund: 199

Deposit Account: Student activity Campus Activity General Operating

Ascender Receipt/Posted #:

Date: