



Join the tradition

BOOTH/TABLE PAYMENT RECEIVED

Receipt #:	2018-09-17-Afghani
Invoice #:	
Date Received:	9/17/2018
Name:	Abdul Waheed
Company:	Afghani Cusine and German Sausage
Street Address:	711 Oak Dale Ave #336
City, State Zip:	Springfield OR 97477
Telephone:	(541) 554-5581
Email:	a.waheedwahed@yahoo.com
Amount Due on Invoice:	\$405.00
Check #:	
Check Amount:	
Cash:	\$405.00
Total Received:	\$405.00
Balance Due:	\$0.00
Number of Booths Requested:	1
Requested Booth Type:	Food
Requested Booth Size:	10' x 15'

Date of Deposit 09/19/2018

D 363

ASUO Deposit Slip

Student Organization ASUO Executive

Index 05035N Purpose/Line Item St Faire Fall 18 Booth Pay

Account Code 06723 Total Deposit \$ 405.00

Type of Deposit (Circle One)		Yes	No
Donation			
U	Did donor receive any benefit?		
N	Is donation for a specific purpose?		
D	Was this money raised on campus?	<input checked="" type="checkbox"/>	
T	Was event funded by I-Fee money?		<input checked="" type="checkbox"/>
Revenue			
E	Was this money raised on campus?	<input checked="" type="checkbox"/>	
N	Was event funded by I-Fee money?		<input checked="" type="checkbox"/>
T	Was event funded by I-Fee money?		<input checked="" type="checkbox"/>
To Cover Negative Balance/Unallowable Purchase		Expense Covered: PO#:	

Currency	Units	Total
<u>100.75</u>	<u>4</u>	<u>400.00</u>
<u>5.15</u>	<u>1</u>	<u>5.00</u>
Total - Currency		405.00

Currency & check entries begin on ASUO Long Form Deposit Slip

Name of Vendor	Check #	Amount
<u>Afghani Cuisine</u>		
<u>Jard Gelman Sausage</u>		
<u>Ardui - Waneed</u>		
Total - Checks		
GRAND TOTAL (Checks & Currency)		405.00

I certify the information above is complete and accurate and these funds rightly belong to the above said organization.

Authorized Signer Name Nicole Nelson

Authorized Signer Signature Nicole Nelson

EMU Staff Signature _____

Index Change Reason: _____

Controller Initial _____

Date _____