

CHECK DEPOSIT

**CONTRACT/GRANT PAYMENT AND PROGRAM INCOME
DEPOSIT SLIP**

DATE: _____

Contact Information

Name _____

Department _____

Email _____

Phone _____

Payer Name	Description	Check Amount	Oracle Award Number	Oracle Project Number

TOTAL: _____

Please mail or deliver checks to Research Finance for deposit.

**Campus Mail PMB 401591
Office Location Baker Building, 9th Floor, Suite 900
Office Phone 615-343-6655**