



Office of the Kansas State Treasurer
Cash Management Division

900 SW Jackson 2nd Floor North Topeka, KS 66612
Phone 785-296-4144 Fax 785-296-6639

Date _____

Business Unit _____

Contact Name _____

Contact Phone _____

Contact Email _____

Deposit Total	\$
Cash Amount	\$
Check Amount	\$
Number of Checks	
Returned Check Total	\$
Number of returned checks	

*****Please provide calculator tapes*****