Southern Illinois University Edwardsville **Collection Report**

Official Receipt

| ID Number | | | | | | For Bursar | 's Office Use Only |
|-----------------|--------------|-----------|--------------|-----------------|--------|-----------------|--------------------|
| Payer's Name | | | | | | | |
| Street | | | | | | | |
| City | | | State | Zip | Zip | | |
| Amount | Budge | t Purpose | Dept. Act. 1 | Natural Account | Object | | |
| | Doggintia | | | | | | |
| | Description | on: | | | | - | |
| | Description: | | | | | | |
| | | | | | | | |
| | Description: | | | | | | |
| | Description: | | | | | | |
| | Description | | | | | _ | |
| | Descriptio | on: | | | | | |
| | Total | | | | | | |
| Explanation: | | | | | | Туре с | of Funds: |
| | | | | | | Cash & Coin | |
| | | | | | | Check | |
| | | | | | | Certified Funds | |
| | | | | | | Credit Card | |
| | | | | | | EFT | |
| | | | | | | Total | |
| Prepared by: | | | | Phone # | #: | | |
| Department: | | | | Box #: | | | |
| Fiscal Officer: | | | | Date: | | | Revision: 6/2011 |