NEW MEXICO TECH
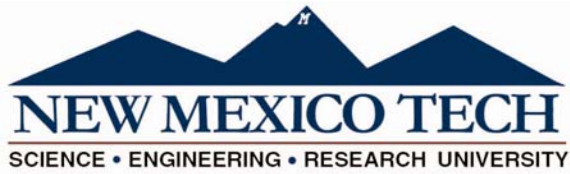## SCIENCE • ENGINEERING • RESEARCH UNIVERSITY

Deposit of Funds

Date _____

Person or Vendor _____

Department _____ PO/DP/Invoice _____

Check Number _____ Check Amount _____

Reason for Refund Check _____

FOAP to be Credited	Amount	Approvals
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
Total	$ _____	

Revised 12/11/09

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