

# USM Foundation

SERVING THE UNIVERSITY SYSTEM *of* MARYLAND

3300 Metzert Road, Adelphi, MD 20783  
(301) 445-8040

## DEPOSIT FORM - NON-GIFTS

**Do not use this form for gift deposits  
or for mixed gift and non-gift deposits**

CAMPUS:

ACCT NUMBER: \_\_\_\_\_

ACCT NAME: \_\_\_\_\_

\$ Amount

Revenue Code

Purpose

\$ Amount	Revenue Code	Purpose
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_ TOTAL DEPOSIT AMOUNT

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Telephone #

**Each revenue code must be on a separate line with the corresponding dollar amount.**

**For each revenue code, indicate the purpose for  
which the funds were received**

**DO NOT SEND CASH. SEND CHECKS OR MONEY ORDERS ONLY!**