

## STUDENT SENATE DEPOSIT FORM

DATE:	CLUB #:
NAME OF CLUB:	
NAME OF ADVISOR:	
DESCRIPTION OF EVENT:	
CASH TOTAL:	
CHECK TOTAL:	
GRAND TOTAL:	
SIGNATURES:	
DEPOSIT MADE BY:	
ADVISOR:	
ASSISTANT FOR FINANCIA	AL ANALYSIS:

Siek Campus Center, Room 210 / (518) 629-7348 / (518) 629-7496 fax 80 Vandenburgh Avenue, Troy, New York 12180-6096/(518)629-HVCC / www.hvcc.edu

**Student Activities / Student Senate Office**