

For Business Office Use	
Date Deposited: _____	Initials _____
Date Corrected: _____	Initials _____

**DALE BUMPERS COLLEGE OF AGRICULTURAL, FOOD AND LIFE
SCIENCES AND ARKANSAS AGRICULTURAL EXPERIMENT STATION
REQUEST FOR DEPOSIT CORRECTION**

Date: _____

I request the attached check, which is copied below, be deposited into the:

Agricultural Experiment Station/University of Arkansas

Cost Center Number & Title 0373-70030-24-0100 ADC Clearing
--

and a check issues to the:

Agricultural Developmental Council

Account Number & Title

The attached documentation provides the justification for this deposit correction. (No deposit corrections will be made without donor-provided documentation of deposit intent.)

Individual Requesting Funds Transfer

Date

Unit Head Approval

Date

Assistant Vice President for Finance and Administration
Arkansas Agricultural Experiment Station

Date

Copy check here