DANE COUNTY
CREDIT UNION

Date

Account Number

Name - please print clearly

SIGNATURE to authorize cash back

X _____

DEPOSIT

Cash $ _____

Check $ _____

Check $ _____
(total from back)

Total $ _____

Cash Back $ _____

Net Deposit $ _____

TRANSFERS

From: _____ To: _____

Amount: _____

From: _____ To: _____

Amount: _____

DISTRIBUTION OF DEPOSIT

Account Type	**Deposit Amount**
Checking	$ _____
Savings (suffix)_____	$ _____
Money Market	$ _____
Loan (suffix)_____	$ _____
Holiday	$ _____
Other Savings_____	$ _____

WITHDRAWAL: Cash / Check

Suffix: _____ Amount: _____

Suffix: _____ Amount: _____

Cashier's Check made payable to:

_____
(please print clearly)

Please list each check separately

	Checks	Dollars	Cents
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Total			