

Direct Deposit Only

Receiving Voucher
Routing Slip

Date Receiving Voucher Entered into CEFMS: _____

Authorized Collector's Name: _____

Name of Person Making Deposit: _____

District: _____

Project: _____

Park: _____

Address: _____

Phone Number: _____

CEFMS Receiving Voucher Number: _____

Date of Deposit	Name of Bank	Amount of Deposit
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*****Please ensure a copy of each deposit ticket that makes up the cumulative amount for this CEFMS Receiving Voucher is securely attached. If you have any questions, please contact the UFC Disbursing Office at 901-874-8432.***