

AGENCY NUMBER	AGENCY BATCH NUMBER	OBJECT CODE HASH TOTAL	TOTAL BATCH AMOUNT	TOTAL NET AMOUNT	BATCH DATE	BATCH NUMBER	FM	BATCH TYPE
								2

<div style="text-align: center;">AGENCY DEPOSIT NUMBER</div> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>	√	TYPE DEPOSIT
		1. DEPOSIT SLIP
		2. CASH & CHECKS
		3. CREDIT ADVICE
		4. CASH
		5. CHECK

BANK DEPOSIT

COMPTROLLER

DO NOT WRITE IN THIS SPACE	

AGENCY NO.	AGENCY NAME
BANK NAME AND LOCATION	DATE

FY 1099

PAYEE (REFUND)	
_____	_____
VENDOR NO./SOCIAL SECURITY NO.	V/S VENDOR REFERENCE NO.
_____	_____
SOURCE OF DEPOSIT	CHECK NO.

TO: STATE TREASURER OF SOUTH CAROLINA

Deposited This Day As Follows:

[illegible]

Bank Account Code

Bank Receipt This Section
STO FORM (7-1-86)