



ROBERT SPRAGUE

TREASURER OF OHIO

Custodial Account Deposit

Agency Name _____

Treasurer Remit No. _____ Date _____

Custodial Account Name _____

Agency Remit No. _____

Custodial Account Number _____

Agency No. _____

Cash	Description	Amount
Subtotal Cash:		

Check#	Description	Amount
Subtotal Checks:		

Wires	Description	Amount
Subtotal Wires:		

Grand Total:		
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Authorized Signature _____

Title _____

Please email using button above or fax to: (614) 485-6893.