UNIVERSITY OF NEVADA, RENO FOUNDATION Transmittal Form - Check or Cash ONLY!

Fees and Other Income Only

- DO NOT SEND CASH IN THE MAIL -

Submitted By: (include Mail Stop)	Phone #:		
' V ONEame:	Foundation 'VOEID:		
8 P S L:U B H (Required if no 'V O E)	TOTAL DEPOS T:		
NAME ON CHECK	CHECK or CASH	CHECK DATE	AMOUNT
	Deceived D		
Description of Fee:	Received By Date:		
*If you need assistance, call: 784-1587		For Foundation Use	Only