



**DEPARTMENT OF JUVENILE JUSTICE  
WELFARE/OFFENDER TRUST FUND DEPOSIT FORM**

**TO: DEPARTMENT OF JUVENILE JUSTICE  
BUREAU OF FINANCE AND ACCOUNTING / REVENUE SECTION  
2737 CENTERVIEW DRIVE  
TALLAHASSEE, FLORIDA 32399-3100**

ORG CODE: \_\_\_\_\_  
FACILITY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

AMOUNT SUBMITTED: \$ \_\_\_\_\_ CHECK ( ) MONEY ORDER ( )

EXPLANATION OF FUNDS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AUTHORIZED BY: \_\_\_\_\_  
TITLE: \_\_\_\_\_  
SUNCOM: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR FINANCE AND ACCOUNTING USE ONLY:

OBJECT CODE: **004010** \_\_\_\_\_  
DEPOSIT NUMBER: \_\_\_\_\_ TRANSACTION DATE: \_\_\_\_\_  
PROCESSED BY: \_\_\_\_\_