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PARTNER RI	JRAL BANK			DEPOSIT SLIP
Account Number		Account Name		
Date		CASH DEPOSIT		
		Denomination	No. of Pieces	Amount
□ Savings Account □ Peso □ Other currency Specify □ Current/Checking Account □ Time Deposit Account Deposited by Signature Over Printed Name				
		Total Cash Deposit		
		Bank/Branch	CHECK DEPOSIT Check Number	A
Contact Number		Dank/Branch	Check Number	Amount
Received by	Posted by		3: 3: 5	
Signature	Signature	Total Check Deposit		
Date	VHEN MACHINE VALIDATED.		TOTAL DEPOSIT	

This deposit is subject to the Terms and Conditions covering this account. Please do not leave your cash deposit without witnessing the actual counting and validation by the teller.