REQUEST FOR AUTHORIZATION FOR FOOD SERVICE
Morris College
Sumter South Carolina 29150

All requests must be fully approved at a **MINIMUM OF 3 BUSINESS DAYS** prior to date needed (**NO EXCEPTIONS**).

- **Date Submitted:** ________________
- **Event Date(s):** ________________
- **Time:** ________________
- **Requested by:** ________________
- **Signature of Dept/Div. Head:** ________________
- **Specific Budget to Be Charged:** ________________
- **Location:** (SPECIFY BLDG/AREA/ROOM) ________________
- **Name of Event:** ________________
- **Special Instructions:** ________________

### FOOD AND SUPPLIES REQUESTED

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<th>QUANTITY</th>
<th>ITEM</th>
<th>COST</th>
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- **Total Cost of Food and Supplies** $ ________________
- **Labor Cost** $ ________________
- **Other Cost** $ ________________
- **Grand Total for Food Service** $ ________________

Food Service Cost Verification__________________________

(*To Be Completed and Signed by the Food Service Director)

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**Approved By:**

- **Administrative Divisional Officer**
- **Director of Business**
- **Director of Financial Services**
- **President**

Revised 2018