



MISSISSIPPI UNIVERSITY FOR WOMEN
PROCUREMENT CARD

Food Purchase Form

Event Date _____ Department _____

Event Time _____ Contact Person _____

Vendor _____ Contact Number _____

Event Location _____

Event Purpose _____

Event Type (check one)	<input type="checkbox"/>	meeting	Please attach agenda, food memo, & Sodexo waiver if required
	<input type="checkbox"/>	event	Please attach food memo & Sodexo waiver if required
	<input type="checkbox"/>	food for use	Please attach food memo & Sodexo waiver if required

Names of Participants | Event Attendees

Title | Affiliation

Signature of Requesting Cardholder

Signature of Purchasing Director

Date

Date

Please fill out Food Memo on other side



MISSISSIPPI UNIVERSITY FOR WOMEN
PROCUREMENT CARD

Food Memo

TO: Resources Management

FROM: _____

DATE: _____

SUBJECT: _____

Food Purchase Event Information

Event _____

Department _____

Contact Person _____

Event Purpose _____

Who will be attending _____

Event Date _____

Meal Cost _____

of Attendees _____

How will the food be purchased _____

Vendor Name _____

If you have any question, please call _____

Signature of Event Representative

Date

Budget Manager's Signature

Date

Please fill out Food Purchase Form on other side