

Request No: _____

Dated: _____

Permission for Provision of Special Meal Request

(Cooking request is required to be submitted at least 3-4 days in advance)

Order Placed by (Name along with designation): _____

Department: _____

Menu: _____

Order Placed For (How Many Persons): _____

Order Placed for (Date & Day): _____

Purpose: _____

Advance Paid (Amount): _____

Order Placed by (Signature): _____

Approved by Provost, Female Hostels: _____

For Official Use

Advance Paid (Amount): _____ Received By: _____

Demand of Grocery Prepared by: _____

Expenditure as per Bills: _____

Amount after adding 15% service charges: _____

Packing Charges (Rs. 10/- per plate), if included: _____

Total Expenditure: _____

Amount Received by: _____

Amount paid to Cooks: _____ Received by (Signature of Cooks): _____

Amount Deposited in Bank: _____ Bank Deposit Slip No. & Date: _____

Adjusted Amount Refunded: _____

Bills & remaining amount forwarded to concerned person: _____

(Mess & Finance Office)