



BINGHAMTON UNIVERSITY DINING SERVICES DONATION REQUEST

Organization Name:	
Which kind of organization describes you best:	
Student Group	
Campus Department	
Off Campus Business	
Other please describe:	
Contact Person:	Title:
Address:	
Phone:	Email:
Today's Date:	
Event Date:	Event Time:

Describe your event.

Specifically what is the donation are you looking for, include the expected number of guests, the food items and amount you would like.

Email your completed form to Lori Benson, Community Liaison, Lori.Benson@sodexo.com four weeks in advance.

We process many requests for donations; each request is taken seriously and will be considered, however we are unable to approve every request. Once a request is reviewed and a decision is made the contact person will be notified at the email address provided.

Date approved _____

Approved donation:

- See above
- Other _____